

☐ VOID ☐ CORRECTED

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|---|-----------------------------------|--|--|--|--|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.<br><b>LATE NIGHT EXPRESS COURIER SER</b><br><b>1545 NE.123RD ST</b><br><b>NORTH MIAMI FL 33161</b> |                                   | 1 Rents<br>\$                                    | OMB No. 1545-0115<br><b>2010</b><br>Form 1099-MISC           |  | <b>Miscellaneous<br/>Income</b>                |
| MORDY/CARLO 718 687-6016  |                                   | 2 Royalties<br>\$                                | 3 Other income<br>\$   |  |  |
| PAYER'S federal identification number   | RECIPIENT'S identification number | 4 Federal income tax withheld<br>\$              | 5 Fishing boat proceeds<br>\$                                | 6 Medical and health care payments<br>\$   | <b>Copy 1<br/>For State Tax<br/>Department</b> |
| RECIPIENT'S name<br><b>MARQUIS P ACKLIN</b><br><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>YONKERS NY 10705</b>                        |                                   | 7 Nonemployee compensation<br>\$ <b>51786.00</b> | 8 Substitute payments in lieu of dividends or interest<br>\$ | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> |  |
| Account number (see instructions)<br><b>M5Y 0019 Batch# 000827</b>  |                                   | 10 Crop insurance proceeds<br>\$                 | 11   | 12   |  |
|   |                                   | 13 Excess golden parachute payments<br>\$        | 14 Gross proceeds paid to an attorney<br>\$                  |  |  |
| 15a Section 409A deferrals<br>\$  | 15b Section 409A income<br>\$     | 16 State tax withheld<br>\$                      | 17 State/Payer's state no.                                   | 18 State income<br>\$  |  |

Form 1099-MISC

Department of the Treasury - Internal Revenue Service



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|---|--|--|--|---|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.<br><b>LATE NIGHT EXPRESS COURIER SER</b><br><b>1545 NE.123RD ST</b><br><br><b>NORTH MIAMI FL 33161</b> |  | 1 Rents<br>\$  | OMB No. 1545-0115<br><br><b>2010</b><br>Form 1099-MISC | <b>Miscellaneous Income</b>                 |
| <b>MORDY/CARLO 718 687-6016</b>   |  | 2 Royalties<br>\$  | <b>Copy 1<br/>For State Tax Department</b>             |   |
| PAYER'S federal identification number   | RECIPIENT'S identification number                | 3 Other income<br>\$   |  | 4 Federal income tax withheld<br>\$         |
| RECIPIENT'S name<br><br><b>WHITE BRYANT</b><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>YONKERS NY 10701</b>                                | 5 Fishing boat proceeds<br>\$                    | 6 Medical and health care payments<br>\$   |  |   |
| Account number (see instructions)<br><b>M5Y 0113 Batch# 000827</b>  | 7 Nonemployee compensation<br>\$ <b>29843.00</b> | 8 Substitute payments in lieu of dividends or interest<br>\$   |  |   |
| 15a Section 409A deferrals<br>\$  | 15b Section 409A income<br>\$                    | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/><br>11 | 10 Crop insurance proceeds<br>\$                       |   |
|   |  | 12   | 13 Excess golden parachute payments<br>\$              | 14 Gross proceeds paid to an attorney<br>\$ |
|   |  | 16 State tax withheld<br>\$  | 17 State/Payer's state no.<br>\$                       | 18 State income<br>\$                       |





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| PAYER'S name, street address, city, state, ZIP code, and telephone no.<br><b>LATE NIGHT EXPRESS COURIER SER</b><br><b>1545 NE.123RD ST</b><br><br><b>NORTH MIAMI FL 33161</b> |                                   | 1 Rents<br>\$  | OMB No. 1545-0115<br><br><b>2010</b><br>Form 1099-MISC   |   | <b>Miscellaneous<br/>Income</b>                |
| MORDY/CARLO 718 687-6016  |                                   | 2 Royalties<br>\$  | 3 Other income<br>\$   |   |  |
| PAYER'S federal identification number   | RECIPIENT'S identification number | 4 Federal income tax withheld<br>\$                          | 5 Fishing boat proceeds<br>\$  |   | <b>Copy 1<br/>For State Tax<br/>Department</b> |
| RECIPIENT'S name<br><br><b>KENNETH CHOW</b><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>ELMHURST NY 11373</b>                               |                                   | 6 Medical and health care payments<br>\$                     | 7 Nonemployee compensation<br>\$ <b>63885.00</b>   |   |  |
| Account number (see instructions)<br><b>M5Y 0024 Batch# 000827</b>  |                                   | 8 Substitute payments in lieu of dividends or interest<br>\$ | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> |   |  |
| 15a Section 409A deferrals<br>\$  |                                   | 10 Crop insurance proceeds<br>\$                             |  | 11  |  |
| 15b Section 409A income<br>\$   |                                   | 12   |  | 13 Excess golden parachute payments<br>\$ |  |
| 16 State tax withheld<br>\$   |                                   | 14 Gross proceeds paid to an attorney<br>\$                  |  | 17 State/Payer's state no.                |  |
| 18 State income<br>\$   |                                   | 19   |  | 20  |  |





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| PAYER'S name, street address, city, state, ZIP code, and telephone no.<br><b>LATE NIGHT EXPRESS COURIER SER</b><br><b>1545 NE.123RD ST</b><br><br><b>NORTH MIAMI FL 33161</b><br><br><b>MORDY/CARLO 718 687-6016</b>           |                                   | 1 Rents<br>\$<br>2 Royalties<br>\$<br>3 Other income<br>\$   | OMB No. 1545-0115<br><br><b>2010</b><br>Form 1099-MISC  | <b>Miscellaneous Income</b><br><br><b>Copy 1</b><br><b>For State Tax Department</b> |
| PAYER'S federal identification number  | RECIPIENT'S identification number | 4 Federal income tax withheld<br>\$<br>5 Fishing boat proceeds<br>\$<br>6 Medical and health care payments<br>\$ | 7 Nonemployee compensation<br>\$ <b>827.00</b><br>8 Substitute payments in lieu of dividends or interest<br>\$<br>9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/><br>\$<br>10 Crop insurance proceeds<br>\$<br>11 <br>12 <br>13 Excess golden parachute payments<br>\$<br>14 Gross proceeds paid to an attorney<br>\$ |   |
| RECIPIENT'S name<br><br><b>IRVING E COLLADO</b><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>COLLEGE POINT NY 11356</b><br>Account number (see instructions)<br><b>M5Y 0183 Batch# 000827</b> |                                   | 15a Section 409A deferrals<br>\$   | 15b Section 409A income<br>\$   | 16 State tax withheld<br>\$<br>17 State/Payer's state no.<br>18 State income<br>\$  |



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| PAYER'S name, street address, city, state, ZIP code, and telephone no.<br><b>LATE NIGHT EXPRESS COURIER SER</b><br><b>1545 NE.123RD ST</b><br><br><b>NORTH MIAMI FL 33161</b><br><br><b>MORDY/CARLO 718 687-6016</b> |                                   | 1 Rents<br>\$<br>2 Royalties<br>\$<br>3 Other income<br>\$   | OMB No. 1545-0115<br><br><b>2010</b><br>Form 1099-MISC                                  | <b>Miscellaneous Income</b><br><br><b>Copy 1</b><br><b>For State Tax Department</b>      |
| PAYER'S federal identification number  | RECIPIENT'S identification number | 4 Federal income tax withheld<br>\$  | 5 Fishing boat proceeds<br>\$   |  |
| RECIPIENT'S name<br><br><b>FERNANDO J HERNANDEZ</b><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>BROOKLYN NY 11211</b>  |                                   | 6 Medical and health care payments<br>\$   | 7 Nonemployee compensation<br>\$ <b>25365.00</b>  | 8 Substitute payments in lieu of dividends or interest<br>\$                             |
| Account number (see instructions)<br><br><b>M5Y 0092 Batch# 000827</b>   |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/><br>10 Crop insurance proceeds<br>\$ | 11  | 12  |
| 13 Excess golden parachute payments<br>\$  |                                   | 14 Gross proceeds paid to an attorney<br>\$  |   |  |
| 15a Section 409A deferrals<br>\$   | 15b Section 409A income<br>\$     | 16 State tax withheld<br>\$  | 17 State/Payer's state no.<br>\$  | 18 State income<br>\$  |



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| PAYER'S name, street address, city, state, ZIP code, and telephone no.<br><b>LATE NIGHT EXPRESS COURIER SER</b><br><b>1545 NE.123RD ST</b><br><b>NORTH MIAMI FL 33161</b> |                                   | 1 Rents<br>\$  | OMB No. 1545-0115<br><b>2010</b><br>Form 1099-MISC           |                                       | Miscellaneous<br>Income |
|   |                                   | 2 Royalties<br>\$  |  |                                       |                         |
| <b>MORDY/CARLO 718 687-6016</b>   |                                   | 3 Other income<br>\$   | 4 Federal income tax withheld<br>\$                          | Copy 1<br>For State Tax<br>Department |                         |
| PAYER'S federal identification number   | RECIPIENT'S identification number | 5 Fishing boat proceeds<br>\$  | 6 Medical and health care payments<br>\$                     |                                       |                         |
| RECIPIENT'S name<br><b>Theresa Jackson</b>  |                                   | 7 Nonemployee compensation<br>\$ <b>64300.00</b>   | 8 Substitute payments in lieu of dividends or interest<br>\$ |                                       |                         |
| Street address (including apt. no.)   |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds<br>\$                             |                                       |                         |
| City, state, and ZIP code<br><b>YONKERS NY 10701</b>  |                                   | 11   | 12   |                                       |                         |
| Account number (see instructions)<br><b>M5Y 0018 Batch# 000827</b>  |                                   | 13 Excess golden parachute payments<br>\$  | 14 Gross proceeds paid to an attorney<br>\$                  |                                       |                         |
| 15a Section 409A deferrals<br>\$  | 15b Section 409A income<br>\$     | 16 State tax withheld<br>\$  | 17 State/Payer's state no.                                   | 18 State income<br>\$                 |                         |

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Department of the Treasury - Internal Revenue Service

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| PAYER'S name, street address, city, state, ZIP code, and telephone no.<br><b>LATE NIGHT EXPRESS COURIER SER</b><br><b>1545 NE.123RD ST</b><br><b>NORTH MIAMI FL 33161</b> |                                   | 1 Rents<br>\$  | OMB No. 1545-0115<br><b>2010</b><br>Form 1099-MISC           |                                       | Miscellaneous<br>Income |
|   |                                   | 2 Royalties<br>\$  |  |                                       |                         |
| <b>MORDY/CARLO 718 687-6016</b>   |                                   | 3 Other income<br>\$   | 4 Federal income tax withheld<br>\$                          | Copy 1<br>For State Tax<br>Department |                         |
| PAYER'S federal identification number   | RECIPIENT'S identification number | 5 Fishing boat proceeds<br>\$  | 6 Medical and health care payments<br>\$                     |                                       |                         |
| RECIPIENT'S name<br><b>CECILIA JACKSON</b>  |                                   | 7 Nonemployee compensation<br>\$ <b>28642.00</b>   | 8 Substitute payments in lieu of dividends or interest<br>\$ |                                       |                         |
| Street address (including apt. no.)   |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds<br>\$                             |                                       |                         |
| City, state, and ZIP code<br><b>BRONX NY 10469</b>  |                                   | 11   | 12   |                                       |                         |
| Account number (see instructions)<br><b>M5Y 0056 Batch# 000827</b>  |                                   | 13 Excess golden parachute payments<br>\$  | 14 Gross proceeds paid to an attorney<br>\$                  |                                       |                         |
| 15a Section 409A deferrals<br>\$  | 15b Section 409A income<br>\$     | 16 State tax withheld<br>\$  | 17 State/Payer's state no.                                   | 18 State income<br>\$                 |                         |

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| PAYER'S name, street address, city, state, ZIP code, and telephone no.<br><b>LATE NIGHT EXPRESS COURIER SER</b><br><b>1545 NE.123RD ST</b><br><b>NORTH MIAMI FL 33161</b><br><br><b>MORDY/CARLO 718 687-6016</b> |                                   | 1 Rents<br>\$  | OMB No. 1545-0115<br><b>2010</b><br>Form 1099-MISC           |  | <b>Miscellaneous<br/>Income</b> |
|  |                                   | 2 Royalties<br>\$  |  |  |                                 |
|  |                                   | 3 Other income<br>\$   | 4 Federal income tax withheld<br>\$                          | <b>Copy 1<br/>For State Tax<br/>Department</b> |                                 |
| PAYER'S federal identification number  | RECIPIENT'S identification number | 5 Fishing boat proceeds<br>\$  | 6 Medical and health care payments<br>\$                     |  |                                 |
| RECIPIENT'S name<br><b>EMANUEL JUSTINIANO</b><br><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>BROOKLYN NY 11206</b>  |                                   | 7 Nonemployee compensation<br>\$ <b>12354.00</b>   | 8 Substitute payments in lieu of dividends or interest<br>\$ |  |                                 |
|  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/><br>11 | 10 Crop insurance proceeds<br>\$                             |  |                                 |
| Account number (see instructions)<br><b>M5Y 0089 Batch# 000827</b>   |                                   | 13 Excess golden parachute payments<br>\$  | 14 Gross proceeds paid to an attorney<br>\$                  |  |                                 |
| 15a Section 409A deferrals<br>\$   | 15b Section 409A income<br>\$     | 16 State tax withheld<br>\$  | 17 State/Payer's state no.                                   | 18 State income<br>\$                          |                                 |

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| PAYER'S name, street address, city, state, ZIP code, and telephone no.<br><b>LATE NIGHT EXPRESS COURIER SER</b><br><b>1545 NE.123RD ST</b><br><br><b>NORTH MIAMI FL 33161</b><br><br><b>MORDY/CARLO 718 687-6016</b> |                                   | 1 Rents  | OMB No. 1545-0115<br><br><b>2010</b><br><br>Form 1099-MISC |                 | <b>Miscellaneous<br/>Income</b>                |
|  |                                   | \$   |  |                 |  |
|  |                                   | 2 Royalties  |  |                 |  |
|  |                                   | \$   |  |                 |  |
|  |                                   | 3 Other income   | 4 Federal income tax withheld                              |                 | <b>Copy 1<br/>For State Tax<br/>Department</b> |
|  |                                   | \$   | \$   |                 |  |
| PAYER'S federal identification number  | RECIPIENT'S identification number | 5 Fishing boat proceeds  | 6 Medical and health care payments                         |                 |  |
|  |                                   | \$   | \$   |                 |  |
| RECIPIENT'S name<br><br><b>BENGALY KONATE</b><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>BRONX NY 10452</b>   |                                   | 7 Nonemployee compensation   | 8 Substitute payments in lieu of dividends or interest     |                 |  |
|  |                                   | \$ <b>1155.00</b>  | \$   |                 |  |
|  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds                                 |                 |  |
|  |                                   | 11   | 12   |                 |  |
| Account number (see instructions)  |                                   | 13 Excess golden parachute payments  | 14 Gross proceeds paid to an attorney                      |                 |  |
| <b>M5Y 0108 Batch# 000827</b>  |                                   | \$   | \$   |                 |  |
| 15a Section 409A deferrals   | 15b Section 409A income           | 16 State tax withheld  | 17 State/Payer's state no.                                 | 18 State income |  |
| \$   | \$                                | \$   |  | \$              |  |
|  |                                   | \$   |  | \$              |  |



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| PAYER'S name, street address, city, state, ZIP code, and telephone no.<br><b>LATE NIGHT EXPRESS COURIER SER</b><br><b>1545 NE.123RD ST</b><br><br><b>NORTH MIAMI FL 33161</b><br><br><b>MORDY/CARLO 718 687-6016</b> |  | 1 Rents                           | OMB No. 1545-0115<br><br><b>2010</b><br>Form 1099-MISC |  | <b>Miscellaneous<br/>Income</b>                |
|  |  | 2 Royalties                       |  |  |  |
|  |  | 3 Other income                    |  |  |  |
| PAYER'S federal identification number  |  | RECIPIENT'S identification number |  | 4 Federal income tax withheld  | <b>Copy 1<br/>For State Tax<br/>Department</b> |
| RECIPIENT'S name<br><br><b>MICHAEL J RODRIGUEZ</b><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>BROOKLYN NY 11226</b>   |  | 5 Fishing boat proceeds           | 6 Medical and health care payments                     |  |  |
| Account number (see instructions)<br><b>M5Y 0103 Batch# 000827</b>   |  | 7 Nonemployee compensation        | 8 Substitute payments in lieu of dividends or interest |  |  |
| 15a Section 409A deferrals   |  | 15b Section 409A income           |  | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds                     |
| 16 State tax withheld  |  | 17 State/Payer's state no.        |  | 18 State income  |  |



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| PAYER'S name, street address, city, state, ZIP code, and telephone no.<br><b>LATE NIGHT EXPRESS COURIER SER</b><br><b>1545 NE.123RD ST</b><br><b>NORTH MIAMI FL 33161</b> |                                   | 1 Rents<br>\$  | OMB No. 1545-0115<br><b>2010</b><br>Form 1099-MISC |  | <b>Miscellaneous<br/>Income</b> |
| MORDY/CARLO 718 687-6016  |                                   | 2 Royalties<br>\$  | 4 Federal income tax withheld<br>\$                | <b>Copy 1<br/>For State Tax<br/>Department</b>               |                                 |
| PAYER'S federal identification number<br>-----  | RECIPIENT'S identification number | 3 Other income<br>\$   | 6 Medical and health care payments<br>\$           |  |                                 |
| RECIPIENT'S name<br><b>BRANDON ROSE</b><br><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>BRONX NY 10469</b>                              |                                   | 5 Fishing boat proceeds<br>\$  | 7 Nonemployee compensation<br>\$ <b>465.00</b>     | 8 Substitute payments in lieu of dividends or interest<br>\$ |                                 |
| Account number (see instructions)<br><b>M5Y 0115 Batch# 000827</b>  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/><br>\$ | 10 Crop insurance proceeds<br>\$                   |  |                                 |
|   |                                   | 11   | 12   |  |                                 |
|   |                                   | 13 Excess golden parachute payments<br>\$  | 14 Gross proceeds paid to an attorney<br>\$        |  |                                 |
| 15a Section 409A deferrals<br>\$  | 15b Section 409A income<br>\$     | 16 State tax withheld<br>\$  | 17 State/Payer's state no.                         | 18 State income<br>\$  |                                 |

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| PAYER'S federal identification number  | RECIPIENT'S identification number | 4 Federal income tax withheld<br>\$<br>5 Fishing boat proceeds<br>\$<br>7 Nonemployee compensation<br>\$ <b>24501.00</b><br>9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 6 Medical and health care payments<br>\$<br>8 Substitute payments in lieu of dividends or interest<br>\$<br>10 Crop insurance proceeds<br>\$ |   |
| RECIPIENT'S name<br><br><b>ANDRES SALAS</b><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>BROOKLYN NY 11211</b>  |                                   | 11 <br>12   | 13 Excess golden parachute payments<br>\$<br>14 Gross proceeds paid to an attorney<br>\$   |   |
| Account number (see instructions)<br><br><b>M5Y 0084 Batch# 000827</b>   |                                   | 15a Section 409A deferrals<br>\$   | 15b Section 409A income<br>\$  | 16 State tax withheld<br>\$<br>17 State/Payer's state no.<br>\$                     |
|  |                                   | 18 State income<br>\$  |  |   |



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| PAYER'S name, street address, city, state, ZIP code, and telephone no.<br><b>LATE NIGHT EXPRESS COURIER SER</b><br><b>1545 NE.123RD ST</b><br><br><b>NORTH MIAMI FL 33161</b> |   | 1 Rents<br>\$<br>2 Royalties<br>\$<br>3 Other income<br>\$  | OMB No. 1545-0115<br><br><b>2010</b><br>Form 1099-MISC   | <b>Miscellaneous Income</b><br><br><b>Copy 1</b><br><b>For State Tax Department</b> |
| MORDY/CARLO<br>PAYER'S federal identification number  | 718 687-6016<br>RECIPIENT'S identification number | 4 Federal income tax withheld<br>\$<br>5 Fishing boat proceeds<br>\$<br>7 Nonemployee compensation<br>\$ <b>9759.00</b><br>9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 6 Medical and health care payments<br>\$<br>8 Substitute payments in lieu of dividends or interest<br>\$<br>10 Crop insurance proceeds<br>\$ |   |
| RECIPIENT'S name<br><br><b>ANDREW O SPENCE</b><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>MOUNT VERNON NY 10550</b>                        |   | 11<br>12  | 13 Excess golden parachute payments<br>\$<br>14 Gross proceeds paid to an attorney<br>\$   |   |
| Account number (see instructions)<br><b>M5Y 0059 Batch# 000827</b>  |   | 15a Section 409A deferrals<br>\$  | 15b Section 409A income<br>\$  | 16 State tax withheld<br>\$   |
|   |   | 17 State/Payer's state no.<br>\$  | 18 State income<br>\$  |   |



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| PAYER'S name, street address, city, state, ZIP code, and telephone no.<br><b>LATE NIGHT EXPRESS COURIER SER</b><br><b>1545 NE.123RD ST</b><br><br><b>NORTH MIAMI FL 33161</b><br><br><b>MORDY/CARLO 718 687-6016</b> |                                   | 1 Rents<br>\$<br>2 Royalties<br>\$<br>3 Other income<br>\$  | OMB No. 1545-0115<br><br><b>2010</b><br>Form 1099-MISC   | <b>Miscellaneous<br/>Income</b><br><br><b>Copy 1<br/>For State Tax<br/>Department</b> |
| PAYER'S federal identification number  | RECIPIENT'S identification number | 4 Federal income tax withheld<br>\$<br>5 Fishing boat proceeds<br>\$<br>7 Nonemployee compensation<br>\$ <b>3846.00</b><br>9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/><br>11 | 6 Medical and health care payments<br>\$<br>8 Substitute payments in lieu of dividends or interest<br>\$<br>10 Crop insurance proceeds<br>\$<br>12 |   |
| RECIPIENT'S name<br><br><b>MARIA TAVARES</b><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>BRONX NY 10458</b><br>Account number (see instructions)<br><b>M5Y 0166 Batch# 000827</b>  |                                   | 13 Excess golden parachute payments<br>\$<br>16 State tax withheld<br>\$  | 14 Gross proceeds paid to an attorney<br>\$<br>17 State/Payer's state no.  | 18 State income<br>\$   |
| 15a Section 409A deferrals<br>\$   | 15b Section 409A income<br>\$     |   |  |   |

Form 1099-MISC

Department of the Treasury - Internal Revenue Service



☐ VOID ☐ CORRECTED

|   |                                   |  |  |  |  |
|---|-----------------------------------|--|--|--|--|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.<br><b>LATE NIGHT EXPRESS COURIER SER</b><br><b>1545 NE.123RD ST</b><br><b>NORTH MIAMI FL 33161</b> |                                   | 1 Rents<br>\$  | OMB No. 1545-0115<br><b>2010</b><br>Form 1099-MISC           |  | <b>Miscellaneous<br/>Income</b>                |
| MORDY/CARLO 718 687-6016  |                                   | 2 Royalties<br>\$  | 4 Federal income tax withheld<br>\$                          |  |  |
| PAYER'S federal identification number   | RECIPIENT'S identification number | 3 Other income<br>\$   | 5 Fishing boat proceeds<br>\$                                | 6 Medical and health care payments<br>\$ | <b>Copy 1<br/>For State Tax<br/>Department</b> |
| RECIPIENT'S name<br><b>DAVID WILLIAMS</b><br><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>YONKERS NY 10703</b>                          |                                   | 7 Nonemployee compensation<br>\$ <b>16016.00</b>   | 8 Substitute payments in lieu of dividends or interest<br>\$ | 10 Crop insurance proceeds<br>\$         |  |
| Account number (see instructions)<br><b>M5Y 0027 Batch# 000827</b>  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 11   | 12                                       |  |
|   |                                   | 13 Excess golden parachute payments<br>\$  | 14 Gross proceeds paid to an attorney<br>\$                  |  |  |
| 15a Section 409A deferrals<br>\$  | 15b Section 409A income<br>\$     | 16 State tax withheld<br>\$  | 17 State/Payer's state no.                                   | 18 State income<br>\$                    |  |

Form 1099-MISC

Department of the Treasury - Internal Revenue Service



☐ CORRECTED (if checked)

|  |                                   |  |  |                 |   |
|--|-----------------------------------|--|--|-----------------|---|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.   |                                   | 1 Rents  | OMB No. 1545-0115                                      |                 | <b>Miscellaneous Income</b>   |
| <b>LATE EXPRESS COURIER SERVICE INC</b><br><b>1545 N.E. 123RD STREET</b><br><b>NORTH MIAMI FL 33161</b><br><b>(866) 373-7450</b> |                                   | \$   | <b>2011</b><br>Form <b>1099-MISC</b>                   |                 |   |
|  |                                   | 2 Royalties  |  |                 |   |
|  |                                   | \$   |  |                 |   |
|  |                                   | 3 Other income   | 4 Federal income tax withheld                          |                 | <b>Copy 2</b><br>To be filed with recipient's state income tax return, when required. |
|  |                                   | \$   | \$   |                 |   |
| PAYER'S federal identification number  | RECIPIENT'S identification number | 5 Fishing boat proceeds  | 6 Medical and health care payments                     |                 |   |
|  |                                   | \$   | \$   |                 |   |
| RECIPIENT'S name   |                                   | 7 Nonemployee compensation   | 8 Substitute payments in lieu of dividends or interest |                 |   |
| <b>MARQUIS P ACKLIN</b><br><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>BRONX NY 10469</b>     |                                   | \$ 4998.00   | \$   |                 |   |
|  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds                             |                 |   |
|  |                                   | \$   | \$   |                 |   |
| Account number (see instructions)  |                                   | 11   | 12   |                 |   |
| 001019LONG/Z66 A   |                                   | 13 Excess golden parachute payments  | 14 Gross proceeds paid to an attorney                  |                 |   |
|  |                                   | \$   | \$   |                 |   |
| 15a Section 409A deferrals   | 15b Section 409A income           | 16 State tax withheld  | 17 State/Payer's state no.                             | 18 State income |   |
| \$   | \$                                | \$   | FL   | \$              |   |
|  |                                   | \$   |  | \$              |   |

Form **1099-MISC**

Department of the Treasury - Internal Revenue Service

☐ CORRECTED (if checked)

|  |                                   |  |  |                 |  |
|--|-----------------------------------|--|--|-----------------|--|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.   |                                   | 1 Rents  | OMB No. 1545-0115                                      |                 | <b>Miscellaneous Income</b>  |
| <b>LATE EXPRESS COURIER SERVICE INC</b><br><b>1545 N.E. 123RD STREET</b><br><b>NORTH MIAMI FL 33161</b><br><b>(866) 373-7450</b> |                                   | \$   | <b>2011</b><br>Form <b>1099-MISC</b>                   |                 |  |
|  |                                   | 2 Royalties  |  |                 |  |
|  |                                   | \$   |  |                 |  |
| LONG/Z66/2011/4/00922 / 002/001019   |                                   | 3 Other income   | 4 Federal income tax withheld                          |                 | <b>Copy B</b><br>For Recipient   |
|  |                                   | \$   | \$   |                 |  |
| PAYER'S federal identification number  | RECIPIENT'S identification number | 5 Fishing boat proceeds  | 6 Medical and health care payments                     |                 | This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. |
|  |                                   | \$   | \$   |                 |  |
| RECIPIENT'S name   |                                   | 7 Nonemployee compensation   | 8 Substitute payments in lieu of dividends or interest |                 |  |
| <b>MARQUIS P ACKLIN</b><br><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>BRONX NY 10469</b>     |                                   | \$ 4998.00   | \$   |                 |  |
|  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds                             |                 |  |
|  |                                   | \$   | \$   |                 |  |
| Account number (see instructions)  |                                   | 11   | 12   |                 |  |
| 001019LONG/Z66 A   |                                   | 13 Excess golden parachute payments  | 14 Gross proceeds paid to an attorney                  |                 |  |
|  |                                   | \$   | \$   |                 |  |
| 15a Section 409A deferrals   | 15b Section 409A income           | 16 State tax withheld  | 17 State/Payer's state no.                             | 18 State income |  |
| \$   | \$                                | \$   | FL   | \$              |  |
|  |                                   | \$   |  | \$              |  |

Form **1099-MISC**

(keep for your records)

Department of the Treasury - Internal Revenue Service



☐ CORRECTED (if checked)

|  |                                   |  |  |                 |   |
|--|-----------------------------------|--|--|-----------------|---|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.   |                                   | 1 Rents  | OMB No. 1545-0115                                      |                 | <b>Miscellaneous Income</b>   |
| <b>LATE EXPRESS COURIER SERVICE INC</b><br><b>1545 N.E. 123RD STREET</b><br><b>NORTH MIAMI FL 33161</b><br><b>(866) 373-7450</b>   |                                   | \$   | <b>2011</b><br>Form <b>1099-MISC</b>                   |                 |   |
|  |                                   | 2 Royalties  |  |                 |   |
|  |                                   | \$   |  |                 |   |
|  |                                   | 3 Other income   | 4 Federal income tax withheld                          |                 | <b>Copy 2</b><br>To be filed with recipient's state income tax return, when required. |
|  |                                   | \$   | \$   |                 |   |
| PAYER'S federal identification number  | RECIPIENT'S identification number | 5 Fishing boat proceeds  | 6 Medical and health care payments                     |                 |   |
|  |                                   | \$   | \$   |                 |   |
| RECIPIENT'S name   |                                   | 7 Nonemployee compensation   | 8 Substitute payments in lieu of dividends or interest |                 |   |
| <b>RAFAEL A BRITO</b><br><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>RICHMOND HILL NY 11418</b> |                                   | \$ <b>5647.00</b>  | \$   |                 |   |
|  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds                             |                 |   |
|  |                                   | 11   | 12   |                 |   |
| Account number (see instructions)  |                                   | 13 Excess golden parachute payments  | 14 Gross proceeds paid to an attorney                  |                 |   |
| <b>000238LONG/Z66 A</b>  |                                   | \$   | \$   |                 |   |
| 15a Section 409A deferrals   | 15b Section 409A income           | 16 State tax withheld  | 17 State/Payer's state no.                             | 18 State income |   |
| \$   | \$                                | \$   | <b>FL</b>  | \$              |   |

Form **1099-MISC**

Department of the Treasury - Internal Revenue Service

☐ CORRECTED (if checked)

|  |                                   |  |  |                 |  |
|--|-----------------------------------|--|--|-----------------|--|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.   |                                   | 1 Rents  | OMB No. 1545-0115                                      |                 | <b>Miscellaneous Income</b>  |
| <b>LATE EXPRESS COURIER SERVICE INC</b><br><b>1545 N.E. 123RD STREET</b><br><b>NORTH MIAMI FL 33161</b><br><b>(866) 373-7450</b>   |                                   | \$   | <b>2011</b><br>Form <b>1099-MISC</b>                   |                 |  |
|  |                                   | 2 Royalties  |  |                 |  |
|  |                                   | \$   |  |                 |  |
| LONG/Z66/2011/4/00922 / 002/000238   |                                   | 3 Other income   | 4 Federal income tax withheld                          |                 | <b>Copy B</b><br>For Recipient   |
|  |                                   | \$   | \$   |                 |  |
| PAYER'S federal identification number  | RECIPIENT'S identification number | 5 Fishing boat proceeds  | 6 Medical and health care payments                     |                 | This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. |
|  |                                   | \$   | \$   |                 |  |
| RECIPIENT'S name   |                                   | 7 Nonemployee compensation   | 8 Substitute payments in lieu of dividends or interest |                 |  |
| <b>RAFAEL A BRITO</b><br><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>RICHMOND HILL NY 11418</b> |                                   | \$ <b>5647.00</b>  | \$   |                 |  |
|  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds                             |                 |  |
|  |                                   | 11   | 12   |                 |  |
| Account number (see instructions)  |                                   | 13 Excess golden parachute payments  | 14 Gross proceeds paid to an attorney                  |                 |  |
| <b>000238LONG/Z66 A</b>  |                                   | \$   | \$   |                 |  |
| 15a Section 409A deferrals   | 15b Section 409A income           | 16 State tax withheld  | 17 State/Payer's state no.                             | 18 State income |  |
| \$   | \$                                | \$   | <b>FL</b>  | \$              |  |

Form **1099-MISC**

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Department of the Treasury - Internal Revenue Service



☐ CORRECTED (if checked)

|  |                                   |  |  |  |   |
|--|-----------------------------------|--|--|--|---|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.   |                                   | 1 Rents  | OMB No. 1545-0115                                      |  | <b>Miscellaneous Income</b>   |
| <b>LATE EXPRESS COURIER SERVICE INC</b><br><b>1545 N.E. 123RD STREET</b><br><b>NORTH MIAMI FL 33161</b><br><b>(866) 373-7450</b>               |                                   | \$   | <b>2011</b><br>Form <b>1099-MISC</b>                   |  |   |
|  |                                   | 2 Royalties  |  |  |   |
|  |                                   | \$   |  |  |   |
|  |                                   | 3 Other income   | 4 Federal income tax withheld                          |  | <b>Copy 2</b><br>To be filed with recipient's state income tax return, when required. |
|  |                                   | \$   | \$   |  |   |
| PAYER'S federal identification number  | RECIPIENT'S identification number | 5 Fishing boat proceeds  | 6 Medical and health care payments                     |  |   |
|  |                                   | \$   | \$   |  |   |
|  |                                   | 7 Nonemployee compensation   | 8 Substitute payments in lieu of dividends or interest |  |   |
| RECIPIENT'S name<br><b>WHITE BRYANT</b><br><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>YONKERS NY 10701</b> |                                   | \$ <b>48427.80</b>   | \$   |  |   |
|  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds                             |  |   |
|  |                                   | \$   | \$   |  |   |
|  |                                   | 11   | 12   |  |   |
|  |                                   | 13 Excess golden parachute payments  | 14 Gross proceeds paid to an attorney                  |  |   |
|  |                                   | \$   | \$   |  |   |
| Account number (see instructions)  |                                   | 16 State tax withheld  | 17 State/Payer's state no.                             |  | 18 State income   |
| <b>000113LONG/Z66 A</b>  |                                   | \$   | <b>FL</b>  |  | \$  |
| 15a Section 409A deferrals   | 15b Section 409A income           | \$   |  |  | \$  |
| \$   | \$                                | \$   |  |  | \$  |

Form **1099-MISC**

Department of the Treasury - Internal Revenue Service

☐ CORRECTED (if checked)

|  |                                   |  |  |  |  |
|--|-----------------------------------|--|--|--|--|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.   |                                   | 1 Rents  | OMB No. 1545-0115                                      |  | <b>Miscellaneous Income</b>  |
| <b>LATE EXPRESS COURIER SERVICE INC</b><br><b>1545 N.E. 123RD STREET</b><br><b>NORTH MIAMI FL 33161</b><br><b>(866) 373-7450</b>               |                                   | \$   | <b>2011</b><br>Form <b>1099-MISC</b>                   |  |  |
|  |                                   | 2 Royalties  |  |  |  |
|  |                                   | \$   |  |  |  |
|  |                                   | 3 Other income   | 4 Federal income tax withheld                          |  | <b>Copy B</b><br>For Recipient<br><br>This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. |
|  |                                   | \$   | \$   |  |  |
| PAYER'S federal identification number  | RECIPIENT'S identification number | 5 Fishing boat proceeds  | 6 Medical and health care payments                     |  |  |
|  |                                   | \$   | \$   |  |  |
|  |                                   | 7 Nonemployee compensation   | 8 Substitute payments in lieu of dividends or interest |  |  |
| RECIPIENT'S name<br><b>WHITE BRYANT</b><br><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>YONKERS NY 10701</b> |                                   | \$ <b>48427.80</b>   | \$   |  |  |
|  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds                             |  |  |
|  |                                   | \$   | \$   |  |  |
|  |                                   | 11   | 12   |  |  |
|  |                                   | 13 Excess golden parachute payments  | 14 Gross proceeds paid to an attorney                  |  |  |
|  |                                   | \$   | \$   |  |  |
| Account number (see instructions)  |                                   | 16 State tax withheld  | 17 State/Payer's state no.                             |  | 18 State income  |
| <b>000113LONG/Z66 A</b>  |                                   | \$   | <b>FL</b>  |  | \$   |
| 15a Section 409A deferrals   | 15b Section 409A income           | \$   |  |  | \$   |
| \$   | \$                                | \$   |  |  | \$   |

Form **1099-MISC**

(keep for your records)

Department of the Treasury - Internal Revenue Service



☐ CORRECTED (if checked)

|   |                                   |  |  |  |   |
|---|-----------------------------------|--|--|--|---|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.  |                                   | 1 Rents  | OMB No. 1545-0115                                      |  | <b>Miscellaneous Income</b>   |
| <b>LATE EXPRESS COURIER SERVICE INC</b><br><b>1545 N.E. 123RD STREET</b><br><b>NORTH MIAMI FL 33161</b><br><b>(866) 373-7450</b>                |                                   | \$   | <b>2011</b><br>Form <b>1099-MISC</b>                   |  |   |
|   |                                   | 2 Royalties  |  |  |   |
|   |                                   | \$   |  |  |   |
|   |                                   | 3 Other income   | 4 Federal income tax withheld                          |  | <b>Copy 2</b><br>To be filed with recipient's state income tax return, when required. |
|   |                                   | \$   | \$   |  |   |
| PAYER'S federal identification number   | RECIPIENT'S identification number | 5 Fishing boat proceeds  | 6 Medical and health care payments                     |  |   |
|   |                                   | \$   | \$   |  |   |
|   |                                   | 7 Nonemployee compensation   | 8 Substitute payments in lieu of dividends or interest |  |   |
| RECIPIENT'S name<br><b>KENNETH CHOW</b><br><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>BROOKLYN NY 11235</b> |                                   | \$ <b>64390.00</b>   | \$   |  |   |
|   |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds                             |  |   |
|   |                                   | \$   | \$   |  |   |
|   |                                   | 11   | 12   |  |   |
|   |                                   | 13 Excess golden parachute payments  | 14 Gross proceeds paid to an attorney                  |  |   |
|   |                                   | \$   | \$   |  |   |
| Account number (see instructions)   |                                   | 16 State tax withheld  | 17 State/Payer's state no.                             |  | 18 State income   |
| <b>001024LONG/Z66 A</b>   |                                   | \$   | <b>FL</b>  |  | \$  |
| 15a Section 409A deferrals  | 15b Section 409A income           | \$   |  |  | \$  |
| \$  | \$                                | \$   |  |  | \$  |

Form **1099-MISC**

Department of the Treasury - Internal Revenue Service

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|   |                                   |  |  |  |  |
|---|-----------------------------------|--|--|--|--|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.  |                                   | 1 Rents  | OMB No. 1545-0115                                      |  | <b>Miscellaneous Income</b>  |
| <b>LATE EXPRESS COURIER SERVICE INC</b><br><b>1545 N.E. 123RD STREET</b><br><b>NORTH MIAMI FL 33161</b><br><b>(866) 373-7450</b>                |                                   | \$   | <b>2011</b><br>Form <b>1099-MISC</b>                   |  |  |
|   |                                   | 2 Royalties  |  |  |  |
|   |                                   | \$   |  |  |  |
|   |                                   | 3 Other income   | 4 Federal income tax withheld                          |  | <b>Copy B</b><br>For Recipient<br><br>This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. |
|   |                                   | \$   | \$   |  |  |
| PAYER'S federal identification number   | RECIPIENT'S identification number | 5 Fishing boat proceeds  | 6 Medical and health care payments                     |  |  |
|   |                                   | \$   | \$   |  |  |
|   |                                   | 7 Nonemployee compensation   | 8 Substitute payments in lieu of dividends or interest |  |  |
| RECIPIENT'S name<br><b>KENNETH CHOW</b><br><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>BROOKLYN NY 11235</b> |                                   | \$ <b>64390.00</b>   | \$   |  |  |
|   |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds                             |  |  |
|   |                                   | \$   | \$   |  |  |
|   |                                   | 11   | 12   |  |  |
|   |                                   | 13 Excess golden parachute payments  | 14 Gross proceeds paid to an attorney                  |  |  |
|   |                                   | \$   | \$   |  |  |
| Account number (see instructions)   |                                   | 16 State tax withheld  | 17 State/Payer's state no.                             |  | 18 State income  |
| <b>001024LONG/Z66 A</b>   |                                   | \$   | <b>FL</b>  |  | \$   |
| 15a Section 409A deferrals  | 15b Section 409A income           | \$   |  |  | \$   |
| \$  | \$                                | \$   |  |  | \$   |

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Department of the Treasury - Internal Revenue Service



☐ CORRECTED (if checked)

|  |                                   |  |  |                 |   |
|--|-----------------------------------|--|--|-----------------|---|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.   |                                   | 1 Rents  | OMB No. 1545-0115                                      |                 | <b>Miscellaneous Income</b>   |
| <b>LATE EXPRESS COURIER SERVICE INC</b><br><b>1545 N.E. 123RD STREET</b><br><b>NORTH MIAMI FL 33161</b><br><b>(866) 373-7450</b>                         |                                   | \$   | <b>2011</b><br>Form <b>1099-MISC</b>                   |                 |   |
|  |                                   | 2 Royalties  |  |                 |   |
|  |                                   | \$   |  |                 |   |
|  |                                   | 3 Other income   | 4 Federal income tax withheld                          |                 | <b>Copy 2</b><br>To be filed with recipient's state income tax return, when required. |
|  |                                   | \$   | \$   |                 |   |
| PAYER'S federal identification number  | RECIPIENT'S identification number | 5 Fishing boat proceeds  | 6 Medical and health care payments                     |                 |   |
|  |                                   | \$   | \$   |                 |   |
|  |                                   | 7 Nonemployee compensation   | 8 Substitute payments in lieu of dividends or interest |                 |   |
| RECIPIENT'S name<br><b>IRVING E COLLADO</b><br><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>COLLEGE POINT NY 11356</b> |                                   | \$ 32132.00  | \$   |                 |   |
|  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds                             |                 |   |
|  |                                   | \$   | \$   |                 |   |
|  |                                   | 11   | 12   |                 |   |
| Account number (see instructions)  |                                   | 13 Excess golden parachute payments  | 14 Gross proceeds paid to an attorney                  |                 |   |
| 000183LONG/Z66 A   |                                   | \$   | \$   |                 |   |
| 15a Section 409A deferrals   | 15b Section 409A income           | 16 State tax withheld  | 17 State/Payer's state no.                             | 18 State income |   |
| \$   | \$                                | \$   | FL   | \$              |   |
| \$   | \$                                | \$   |  | \$              |   |

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Department of the Treasury - Internal Revenue Service

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|  |                                   |  |  |                 |  |
|--|-----------------------------------|--|--|-----------------|--|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.   |                                   | 1 Rents  | OMB No. 1545-0115                                      |                 | <b>Miscellaneous Income</b>  |
| <b>LATE EXPRESS COURIER SERVICE INC</b><br><b>1545 N.E. 123RD STREET</b><br><b>NORTH MIAMI FL 33161</b><br><b>(866) 373-7450</b>                         |                                   | \$   | <b>2011</b><br>Form <b>1099-MISC</b>                   |                 |  |
|  |                                   | 2 Royalties  |  |                 |  |
|  |                                   | \$   |  |                 |  |
| LONG/Z66/2011/4/00922 / 002/000183   |                                   | 3 Other income   | 4 Federal income tax withheld                          |                 | <b>Copy B</b><br>For Recipient   |
|  |                                   | \$   | \$   |                 |  |
| PAYER'S federal identification number  | RECIPIENT'S identification number | 5 Fishing boat proceeds  | 6 Medical and health care payments                     |                 | This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. |
|  |                                   | \$   | \$   |                 |  |
| RECIPIENT'S name<br><b>IRVING E COLLADO</b><br><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>COLLEGE POINT NY 11356</b> |                                   | 7 Nonemployee compensation   | 8 Substitute payments in lieu of dividends or interest |                 |  |
|  |                                   | \$ 32132.00  | \$   |                 |  |
|  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds                             |                 |  |
|  |                                   | \$   | \$   |                 |  |
|  |                                   | 11   | 12   |                 |  |
| Account number (see instructions)  |                                   | 13 Excess golden parachute payments  | 14 Gross proceeds paid to an attorney                  |                 |  |
| 000183LONG/Z66 A   |                                   | \$   | \$   |                 |  |
| 15a Section 409A deferrals   | 15b Section 409A income           | 16 State tax withheld  | 17 State/Payer's state no.                             | 18 State income |  |
| \$   | \$                                | \$   | FL   | \$              |  |
| \$   | \$                                | \$   |  | \$              |  |

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Department of the Treasury - Internal Revenue Service



☐ CORRECTED (if checked)

|  |                                   |  |  |                 |   |
|--|-----------------------------------|--|--|-----------------|---|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.   |                                   | 1 Rents  | OMB No. 1545-0115                                      |                 | <b>Miscellaneous Income</b>   |
| <b>LATE EXPRESS COURIER SERVICE INC</b><br><b>1545 N.E. 123RD STREET</b><br><b>NORTH MIAMI FL 33161</b><br><b>(866) 373-7450</b> |                                   | \$   | <b>2011</b><br>Form <b>1099-MISC</b>                   |                 |   |
|  |                                   | 2 Royalties  |  |                 |   |
|  |                                   | \$   |  |                 |   |
|  |                                   | 3 Other income   | 4 Federal income tax withheld                          |                 | <b>Copy 2</b><br>To be filed with recipient's state income tax return, when required. |
|  |                                   | \$   | \$   |                 |   |
| PAYER'S federal identification number  | RECIPIENT'S identification number | 5 Fishing boat proceeds  | 6 Medical and health care payments                     |                 |   |
|  |                                   | \$   | \$   |                 |   |
| RECIPIENT'S name   |                                   | 7 Nonemployee compensation   | 8 Substitute payments in lieu of dividends or interest |                 |   |
| JUAN C CORREA  |                                   | \$ 52000.00  | \$   |                 |   |
| Street address (including apt. no.)  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds                             |                 |   |
| City, state, and ZIP code  |                                   | 11   | 12   |                 |   |
| BROOKLYN NY 11221  |                                   |  |  |                 |   |
| Account number (see instructions)  |                                   | 13 Excess golden parachute payments  | 14 Gross proceeds paid to an attorney                  |                 |   |
| 000189LONG/Z66 A   |                                   | \$   | \$   |                 |   |
| 15a Section 409A deferrals   | 15b Section 409A income           | 16 State tax withheld  | 17 State/Payer's state no.                             | 18 State income |   |
| \$   | \$                                | \$   | FL   | \$              |   |

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Department of the Treasury - Internal Revenue Service

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|  |                                   |  |  |                 |  |
|--|-----------------------------------|--|--|-----------------|--|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.   |                                   | 1 Rents  | OMB No. 1545-0115                                      |                 | <b>Miscellaneous Income</b>  |
| <b>LATE EXPRESS COURIER SERVICE INC</b><br><b>1545 N.E. 123RD STREET</b><br><b>NORTH MIAMI FL 33161</b><br><b>(866) 373-7450</b> |                                   | \$   | <b>2011</b><br>Form <b>1099-MISC</b>                   |                 |  |
|  |                                   | 2 Royalties  |  |                 |  |
|  |                                   | \$   |  |                 |  |
| LONG/Z66/2011/4/00922 / 002/000189   |                                   | 3 Other income   | 4 Federal income tax withheld                          |                 | <b>Copy B</b><br>For Recipient   |
|  |                                   | \$   | \$   |                 |  |
| PAYER'S federal identification number  | RECIPIENT'S identification number | 5 Fishing boat proceeds  | 6 Medical and health care payments                     |                 | This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. |
|  |                                   | \$   | \$   |                 |  |
| RECIPIENT'S name   |                                   | 7 Nonemployee compensation   | 8 Substitute payments in lieu of dividends or interest |                 |  |
| JUAN C CORREA  |                                   | \$ 52000.00  | \$   |                 |  |
| Street address (including apt. no.)  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds                             |                 |  |
| City, state, and ZIP code  |                                   | 11   | 12   |                 |  |
| BROOKLYN NY 11221  |                                   |  |  |                 |  |
| Account number (see instructions)  |                                   | 13 Excess golden parachute payments  | 14 Gross proceeds paid to an attorney                  |                 |  |
| 000189LONG/Z66 A   |                                   | \$   | \$   |                 |  |
| 15a Section 409A deferrals   | 15b Section 409A income           | 16 State tax withheld  | 17 State/Payer's state no.                             | 18 State income |  |
| \$   | \$                                | \$   | FL   | \$              |  |

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Department of the Treasury - Internal Revenue Service



☐ CORRECTED (if checked)

|  |                                   |  |  |                 |   |
|--|-----------------------------------|--|--|-----------------|---|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.   |                                   | 1 Rents  | OMB No. 1545-0115                                      |                 | <b>Miscellaneous Income</b>   |
| <b>LATE EXPRESS COURIER SERVICE INC</b><br><b>1545 N.E. 123RD STREET</b><br><b>NORTH MIAMI FL 33161</b><br><b>(866) 373-7450</b> |                                   | \$   | <b>2011</b><br>Form <b>1099-MISC</b>                   |                 |   |
|  |                                   | 2 Royalties  |  |                 |   |
|  |                                   | \$   |  |                 |   |
|  |                                   | 3 Other income   | 4 Federal income tax withheld                          |                 | <b>Copy 2</b><br>To be filed with recipient's state income tax return, when required. |
|  |                                   | \$   | \$   |                 |   |
| PAYER'S federal identification number  | RECIPIENT'S identification number | 5 Fishing boat proceeds  | 6 Medical and health care payments                     |                 |   |
|  |                                   | \$   | \$   |                 |   |
| RECIPIENT'S name   |                                   | 7 Nonemployee compensation   | 8 Substitute payments in lieu of dividends or interest |                 |   |
| DENNY M DELAROSA   |                                   | \$ 17193.00  | \$   |                 |   |
| Street address (including apt. no.)  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds                             |                 |   |
| City, state, and ZIP code  |                                   | 11   | 12   |                 |   |
| NEW YORK NY 10035  |                                   |  |  |                 |   |
| Account number (see instructions)  |                                   | 13 Excess golden parachute payments  | 14 Gross proceeds paid to an attorney                  |                 |   |
| 009003LONG/Z66 A   |                                   | \$   | \$   |                 |   |
| 15a Section 409A deferrals   | 15b Section 409A income           | 16 State tax withheld  | 17 State/Payer's state no.                             | 18 State income |   |
| \$   | \$                                | \$   | FL   | \$              |   |
|  |                                   | \$   |  | \$              |   |

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Department of the Treasury - Internal Revenue Service

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|  |                                   |  |  |                 |  |
|--|-----------------------------------|--|--|-----------------|--|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.   |                                   | 1 Rents  | OMB No. 1545-0115                                      |                 | <b>Miscellaneous Income</b>  |
| <b>LATE EXPRESS COURIER SERVICE INC</b><br><b>1545 N.E. 123RD STREET</b><br><b>NORTH MIAMI FL 33161</b><br><b>(866) 373-7450</b> |                                   | \$   | <b>2011</b><br>Form <b>1099-MISC</b>                   |                 |  |
|  |                                   | 2 Royalties  |  |                 |  |
|  |                                   | \$   |  |                 |  |
| LONG/Z66/2011/4/00922 / 002/009003   |                                   | 3 Other income   | 4 Federal income tax withheld                          |                 | <b>Copy B</b><br>For Recipient   |
|  |                                   | \$   | \$   |                 |  |
| PAYER'S federal identification number  | RECIPIENT'S identification number | 5 Fishing boat proceeds  | 6 Medical and health care payments                     |                 | This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. |
|  |                                   | \$   | \$   |                 |  |
| RECIPIENT'S name   |                                   | 7 Nonemployee compensation   | 8 Substitute payments in lieu of dividends or interest |                 |  |
| DENNY M DELAROSA   |                                   | \$ 17193.00  | \$   |                 |  |
| Street address (including apt. no.)  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds                             |                 |  |
| City, state, and ZIP code  |                                   | 11   | 12   |                 |  |
| NEW YORK NY 10035  |                                   |  |  |                 |  |
| Account number (see instructions)  |                                   | 13 Excess golden parachute payments  | 14 Gross proceeds paid to an attorney                  |                 |  |
| 009003LONG/Z66 A   |                                   | \$   | \$   |                 |  |
| 15a Section 409A deferrals   | 15b Section 409A income           | 16 State tax withheld  | 17 State/Payer's state no.                             | 18 State income |  |
| \$   | \$                                | \$   | FL   | \$              |  |
|  |                                   | \$   |  | \$              |  |

Form **1099-MISC**

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Department of the Treasury - Internal Revenue Service



☐ CORRECTED (if checked)

|   |                                   |  |  |                       |   |
|---|-----------------------------------|--|--|-----------------------|---|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.                            |                                   | 1 Rents<br>\$  | OMB No. 1545-0115<br><b>2011</b><br>Form 1099-MISC           |                       | <b>Miscellaneous Income</b>   |
| LATE EXPRESS COURIER SERVICE INC (866) 373-7450<br>1545 N.E. 123RD STREET<br>NORTH MIAMI FL 33161 |                                   | 2 Royalties<br>\$  | 4 Federal income tax withheld<br>\$                          |                       |   |
|   |                                   | 3 Other income<br>\$   |  |                       |   |
|   |                                   | 5 Fishing boat proceeds<br>\$  |  |                       |   |
| PAYER'S federal identification number   | RECIPIENT'S identification number | 7 Nonemployee compensation<br>\$ 21255.00  | 8 Substitute payments in lieu of dividends or interest<br>\$ |                       | <b>Copy 2</b><br>To be filed with recipient's state income tax return, when required. |
| RECIPIENT'S name<br>ORTIZ EZEQUIEL  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds<br>\$                             |                       |   |
| Street address (including apt. no.)   |                                   | 11   | 12   |                       |   |
| City, state, and ZIP code<br>MACUGIE PA 18062   |                                   | 13 Excess golden parachute payments<br>\$  | 14 Gross proceeds paid to an attorney<br>\$                  |                       |   |
| Account number (see instructions)<br>009035LONG/Z66 A   |                                   | 16 State tax withheld<br>\$  | 17 State/Payer's state no.<br>FL                             | 18 State income<br>\$ |   |
| 15a Section 409A deferrals<br>\$  | 15b Section 409A income<br>\$     |  |  |                       |   |

Form 1099-MISC

Department of the Treasury - Internal Revenue Service

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|   |                                   |  |  |                       |   |
|---|-----------------------------------|--|--|-----------------------|---|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.                            |                                   | 1 Rents<br>\$  | OMB No. 1545-0115<br><b>2011</b><br>Form 1099-MISC           |                       | <b>Miscellaneous Income</b>   |
| LATE EXPRESS COURIER SERVICE INC (866) 373-7450<br>1545 N.E. 123RD STREET<br>NORTH MIAMI FL 33161 |                                   | 2 Royalties<br>\$  | 4 Federal income tax withheld<br>\$                          |                       |   |
|   |                                   | 3 Other income<br>\$   |  |                       |   |
|   |                                   | 5 Fishing boat proceeds<br>\$  |  |                       |   |
| PAYER'S federal identification number   | RECIPIENT'S identification number | 7 Nonemployee compensation<br>\$ 21255.00  | 8 Substitute payments in lieu of dividends or interest<br>\$ |                       | <b>Copy B For Recipient</b><br><br>This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. |
| LONG/Z66/2011/4/00922 / 004/009035  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds<br>\$                             |                       |   |
| RECIPIENT'S name<br>ORTIZ EZEQUIEL  |                                   | 11   | 12   |                       |   |
| Street address (including apt. no.)   |                                   | 13 Excess golden parachute payments<br>\$  | 14 Gross proceeds paid to an attorney<br>\$                  |                       |   |
| City, state, and ZIP code<br>MACUGIE PA 18062   |                                   | 16 State tax withheld<br>\$  | 17 State/Payer's state no.<br>FL                             | 18 State income<br>\$ |   |
| Account number (see instructions)<br>009035LONG/Z66 A   |                                   |  |  |                       |   |
| 15a Section 409A deferrals<br>\$  | 15b Section 409A income<br>\$     |  |  |                       |   |

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Department of the Treasury - Internal Revenue Service



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|  |    |  |  |  |   |
|--|----|--|--|--|---|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.   |    | 1 Rents  | OMB No. 1545-0115                                      |  | <b>Miscellaneous Income</b>   |
| <b>LATE EXPRESS COURIER SERVICE INC</b><br><b>1545 N.E. 123RD STREET</b><br><b>NORTH MIAMI FL 33161</b><br><b>(866) 373-7450</b> |    | \$   | <b>2011</b><br>Form <b>1099-MISC</b>                   |  |   |
|  |    | 2 Royalties  |  |  |   |
|  |    | \$   | 4 Federal income tax withheld                          |  | <b>Copy 2</b><br>To be filed with recipient's state income tax return, when required. |
|  |    | 3 Other income   |  |  |   |
| PAYER'S federal identification number  |    | \$   | 6 Medical and health care payments                     |  |   |
| RECIPIENT'S identification number  |    | \$   | 8 Substitute payments in lieu of dividends or interest |  |   |
| RECIPIENT'S name   |    | 7 Nonemployee compensation   | 10 Crop insurance proceeds                             |  |   |
| <b>YAJAIRA GUERRERO</b><br><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>BROOKLYN NY 11208</b>  |    | \$ <b>20176.00</b>   | \$   |  |   |
| Account number (see instructions)  |    | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | \$   |  |   |
| 000188LONG/Z66 A   |    | 11   | 12   |  |   |
| 15a Section 409A deferrals   |    | 13 Excess golden parachute payments  | 14 Gross proceeds paid to an attorney                  |  |   |
| 15b Section 409A income  |    | \$   | \$   |  |   |
| \$   | \$ | 16 State tax withheld  | 17 State/Payer's state no.                             |  |   |
|  |    | \$   | FL   |  |   |
|  |    | \$   | \$   |  |   |
|  |    | \$   | \$   |  |   |

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Department of the Treasury - Internal Revenue Service

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|  |    |  |  |  |  |
|--|----|--|--|--|--|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.   |    | 1 Rents  | OMB No. 1545-0115                                      |  | <b>Miscellaneous Income</b>  |
| <b>LATE EXPRESS COURIER SERVICE INC</b><br><b>1545 N.E. 123RD STREET</b><br><b>NORTH MIAMI FL 33161</b><br><b>(866) 373-7450</b> |    | \$   | <b>2011</b><br>Form <b>1099-MISC</b>                   |  |  |
|  |    | 2 Royalties  |  |  |  |
| <b>LONG/Z66/2011/4/00922 / 002/000188</b>  |    | \$   | 4 Federal income tax withheld                          |  | <b>Copy B</b><br>For Recipient<br><br>This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. |
|  |    | 3 Other income   | \$   |  |  |
| PAYER'S federal identification number  |    | 5 Fishing boat proceeds  | 6 Medical and health care payments                     |  |  |
| RECIPIENT'S identification number  |    | \$   | \$   |  |  |
| RECIPIENT'S name   |    | 7 Nonemployee compensation   | 8 Substitute payments in lieu of dividends or interest |  |  |
| <b>YAJAIRA GUERRERO</b><br><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>BROOKLYN NY 11208</b>  |    | \$ <b>20176.00</b>   | \$   |  |  |
| Account number (see instructions)  |    | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | \$   |  |  |
| 000188LONG/Z66 A   |    | 11   | 12   |  |  |
| 15a Section 409A deferrals   |    | 13 Excess golden parachute payments  | 14 Gross proceeds paid to an attorney                  |  |  |
| 15b Section 409A income  |    | \$   | \$   |  |  |
| \$   | \$ | 16 State tax withheld  | 17 State/Payer's state no.                             |  |  |
|  |    | \$   | FL   |  |  |
|  |    | \$   | \$   |  |  |
|  |    | \$   | \$   |  |  |

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Department of the Treasury - Internal Revenue Service



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|   |    |  |  |  |   |
|---|----|--|--|--|---|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.  |    | 1 Rents  | OMB No. 1545-0115                                      |  | <b>Miscellaneous Income</b>   |
| <b>LATE EXPRESS COURIER SERVICE INC</b><br><b>1545 N.E. 123RD STREET</b><br><b>NORTH MIAMI FL 33161</b><br><b>(866) 373-7450</b>    |    | \$   | <b>2011</b><br>Form <b>1099-MISC</b>                   |  |   |
|   |    | 2 Royalties  |  |  |   |
|   |    | \$   | 4 Federal income tax withheld                          |  | <b>Copy 2</b><br>To be filed with recipient's state income tax return, when required. |
|   |    | 3 Other income   |  |  |   |
| PAYER'S federal identification number   |    | \$   | 6 Medical and health care payments                     |  |   |
| RECIPIENT'S identification number   |    | \$   | 8 Substitute payments in lieu of dividends or interest |  |   |
| RECIPIENT'S name  |    | 7 Nonemployee compensation   | 10 Crop insurance proceeds                             |  |   |
| <b>FERNANDO J HERNANDEZ</b><br><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>BROOKLYN NY 11211</b> |    | \$ <b>40712.00</b>   | \$   |  |   |
|   |    | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | \$   |  |   |
| Account number (see instructions)   |    | 11   | 12   |  |   |
| 000092LONG/Z66 A  |    | 13 Excess golden parachute payments  | 14 Gross proceeds paid to an attorney                  |  |   |
| 15a Section 409A deferrals  |    | \$   | \$   |  |   |
| 15b Section 409A income   |    | 16 State tax withheld  | 17 State/Payer's state no.                             |  |   |
| \$  | \$ | \$   | FL   |  |   |
|   |    | \$   | \$   |  |   |

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Department of the Treasury - Internal Revenue Service

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|   |    |  |  |  |  |
|---|----|--|--|--|--|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.  |    | 1 Rents  | OMB No. 1545-0115                                      |  | <b>Miscellaneous Income</b>  |
| <b>LATE EXPRESS COURIER SERVICE INC</b><br><b>1545 N.E. 123RD STREET</b><br><b>NORTH MIAMI FL 33161</b><br><b>(866) 373-7450</b>    |    | \$   | <b>2011</b><br>Form <b>1099-MISC</b>                   |  |  |
|   |    | 2 Royalties  |  |  |  |
| <b>LONG/Z66/2011/4/00922 / 002/000092</b>   |    | \$   | 4 Federal income tax withheld                          |  | <b>Copy B</b><br>For Recipient<br><br>This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. |
|   |    | 3 Other income   | \$   |  |  |
| PAYER'S federal identification number   |    | 5 Fishing boat proceeds  | 6 Medical and health care payments                     |  |  |
| RECIPIENT'S identification number   |    | \$   | \$   |  |  |
| RECIPIENT'S name  |    | 7 Nonemployee compensation   | 8 Substitute payments in lieu of dividends or interest |  |  |
| <b>FERNANDO J HERNANDEZ</b><br><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>BROOKLYN NY 11211</b> |    | \$ <b>40712.00</b>   | \$   |  |  |
|   |    | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | \$   |  |  |
| Account number (see instructions)   |    | 11   | 12   |  |  |
| 000092LONG/Z66 A  |    | 13 Excess golden parachute payments  | 14 Gross proceeds paid to an attorney                  |  |  |
| 15a Section 409A deferrals  |    | \$   | \$   |  |  |
| 15b Section 409A income   |    | 16 State tax withheld  | 17 State/Payer's state no.                             |  |  |
| \$  | \$ | \$   | FL   |  |  |
|   |    | \$   | \$   |  |  |

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|  |                                   |  |  |                 |   |
|--|-----------------------------------|--|--|-----------------|---|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.   |                                   | 1 Rents  | OMB No. 1545-0115                                      |                 | <b>Miscellaneous Income</b>   |
| <b>LATE EXPRESS COURIER SERVICE INC</b><br><b>1545 N.E. 123RD STREET</b><br><b>NORTH MIAMI FL 33161</b><br><b>(866) 373-7450</b> |                                   | \$   | <b>2011</b><br>Form <b>1099-MISC</b>                   |                 |   |
|  |                                   | 2 Royalties  |  |                 |   |
|  |                                   | \$   |  |                 |   |
|  |                                   | 3 Other income   | 4 Federal income tax withheld                          |                 | <b>Copy 2</b><br>To be filed with recipient's state income tax return, when required. |
|  |                                   | \$   | \$   |                 |   |
| PAYER'S federal identification number  | RECIPIENT'S identification number | 5 Fishing boat proceeds  | 6 Medical and health care payments                     |                 |   |
|  |                                   | \$   | \$   |                 |   |
| RECIPIENT'S name   |                                   | 7 Nonemployee compensation   | 8 Substitute payments in lieu of dividends or interest |                 |   |
| <b>THERESA JACKSON</b><br><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>YONKERS NY 10701</b>    |                                   | \$ <b>28890.00</b>   | \$   |                 |   |
|  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds                             |                 |   |
|  |                                   | 11   | 12   |                 |   |
| Account number (see instructions)  |                                   | 13 Excess golden parachute payments  | 14 Gross proceeds paid to an attorney                  |                 |   |
| <b>001018LONG/Z66 A</b>  |                                   | \$   | \$   |                 |   |
| 15a Section 409A deferrals   | 15b Section 409A income           | 16 State tax withheld  | 17 State/Payer's state no.                             | 18 State income |   |
| \$   | \$                                | \$   | <b>FL</b>  | \$              |   |

Form **1099-MISC**

Department of the Treasury - Internal Revenue Service

☐ CORRECTED (if checked)

|  |                                   |  |  |                 |  |
|--|-----------------------------------|--|--|-----------------|--|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.   |                                   | 1 Rents  | OMB No. 1545-0115                                      |                 | <b>Miscellaneous Income</b>  |
| <b>LATE EXPRESS COURIER SERVICE INC</b><br><b>1545 N.E. 123RD STREET</b><br><b>NORTH MIAMI FL 33161</b><br><b>(866) 373-7450</b> |                                   | \$   | <b>2011</b><br>Form <b>1099-MISC</b>                   |                 |  |
|  |                                   | 2 Royalties  |  |                 |  |
|  |                                   | \$   |  |                 |  |
| LONG/Z66/2011/4/00922 / 002/001018   |                                   | 3 Other income   | 4 Federal income tax withheld                          |                 | <b>Copy B</b><br>For Recipient   |
|  |                                   | \$   | \$   |                 |  |
| PAYER'S federal identification number  | RECIPIENT'S identification number | 5 Fishing boat proceeds  | 6 Medical and health care payments                     |                 | This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. |
|  |                                   | \$   | \$   |                 |  |
| RECIPIENT'S name   |                                   | 7 Nonemployee compensation   | 8 Substitute payments in lieu of dividends or interest |                 |  |
| <b>THERESA JACKSON</b><br><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>YONKERS NY 10701</b>    |                                   | \$ <b>28890.00</b>   | \$   |                 |  |
|  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds                             |                 |  |
|  |                                   | 11   | 12   |                 |  |
| Account number (see instructions)  |                                   | 13 Excess golden parachute payments  | 14 Gross proceeds paid to an attorney                  |                 |  |
| <b>001018LONG/Z66 A</b>  |                                   | \$   | \$   |                 |  |
| 15a Section 409A deferrals   | 15b Section 409A income           | 16 State tax withheld  | 17 State/Payer's state no.                             | 18 State income |  |
| \$   | \$                                | \$   | <b>FL</b>  | \$              |  |

Form **1099-MISC**

(keep for your records)

Department of the Treasury - Internal Revenue Service



☐ CORRECTED (if checked)

|   |                                   |  |  |                 |   |
|---|-----------------------------------|--|--|-----------------|---|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.  |                                   | 1 Rents  | OMB No. 1545-0115                                      |                 | <b>Miscellaneous Income</b>   |
| <b>LATE EXPRESS COURIER SERVICE INC</b><br><b>1545 N.E. 123RD STREET</b><br><b>NORTH MIAMI FL 33161</b><br><b>(866) 373-7450</b>                |                                   | \$   | <b>2011</b><br>Form <b>1099-MISC</b>                   |                 |   |
|   |                                   | 2 Royalties  |  |                 |   |
|   |                                   | \$   |  |                 |   |
|   |                                   | 3 Other income   | 4 Federal income tax withheld                          |                 | <b>Copy 2</b><br>To be filed with recipient's state income tax return, when required. |
|   |                                   | \$   | \$   |                 |   |
| PAYER'S federal identification number   | RECIPIENT'S identification number | 5 Fishing boat proceeds  | 6 Medical and health care payments                     |                 |   |
|   |                                   | \$   | \$   |                 |   |
|   |                                   | 7 Nonemployee compensation   | 8 Substitute payments in lieu of dividends or interest |                 |   |
| RECIPIENT'S name<br><b>DARRYL JAMES</b><br><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>BROOKLYN NY 11213</b> |                                   | \$ 443.00  | \$   |                 |   |
|   |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds                             |                 |   |
|   |                                   | \$   | \$   |                 |   |
| Account number (see instructions)   |                                   | 11   | 12   |                 |   |
| 009050LONG/Z66 A  |                                   | 13 Excess golden parachute payments  | 14 Gross proceeds paid to an attorney                  |                 |   |
|   |                                   | \$   | \$   |                 |   |
| 15a Section 409A deferrals  | 15b Section 409A income           | 16 State tax withheld  | 17 State/Payer's state no.                             | 18 State income |   |
| \$  | \$                                | \$   | FL   | \$              |   |
| \$  | \$                                | \$   |  | \$              |   |

Form **1099-MISC**

Department of the Treasury - Internal Revenue Service

☐ CORRECTED (if checked)

|   |                                   |  |  |                 |  |
|---|-----------------------------------|--|--|-----------------|--|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.  |                                   | 1 Rents  | OMB No. 1545-0115                                      |                 | <b>Miscellaneous Income</b>  |
| <b>LATE EXPRESS COURIER SERVICE INC</b><br><b>1545 N.E. 123RD STREET</b><br><b>NORTH MIAMI FL 33161</b><br><b>(866) 373-7450</b>                |                                   | \$   | <b>2011</b><br>Form <b>1099-MISC</b>                   |                 |  |
|   |                                   | 2 Royalties  |  |                 |  |
|   |                                   | \$   |  |                 |  |
| LONG/Z66/2011/4/00922 / 002/009050  |                                   | 3 Other income   | 4 Federal income tax withheld                          |                 | <b>Copy B</b><br>For Recipient   |
|   |                                   | \$   | \$   |                 |  |
| PAYER'S federal identification number   | RECIPIENT'S identification number | 5 Fishing boat proceeds  | 6 Medical and health care payments                     |                 | This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. |
|   |                                   | \$   | \$   |                 |  |
| RECIPIENT'S name<br><b>DARRYL JAMES</b><br><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>BROOKLYN NY 11213</b> |                                   | 7 Nonemployee compensation   | 8 Substitute payments in lieu of dividends or interest |                 |  |
|   |                                   | \$ 443.00  | \$   |                 |  |
|   |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds                             |                 |  |
|   |                                   | \$   | \$   |                 |  |
| Account number (see instructions)   |                                   | 11   | 12   |                 |  |
| 009050LONG/Z66 A  |                                   | 13 Excess golden parachute payments  | 14 Gross proceeds paid to an attorney                  |                 |  |
|   |                                   | \$   | \$   |                 |  |
| 15a Section 409A deferrals  | 15b Section 409A income           | 16 State tax withheld  | 17 State/Payer's state no.                             | 18 State income |  |
| \$  | \$                                | \$   | FL   | \$              |  |
| \$  | \$                                | \$   |  | \$              |  |

Form **1099-MISC**

(keep for your records)

Department of the Treasury - Internal Revenue Service



☐ CORRECTED (if checked)

|  |                                   |  |  |                 |   |
|--|-----------------------------------|--|--|-----------------|---|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.   |                                   | 1 Rents  | OMB No. 1545-0115                                      |                 | <b>Miscellaneous Income</b>   |
| <b>LATE EXPRESS COURIER SERVICE INC</b><br><b>1545 N.E. 123RD STREET</b><br><b>NORTH MIAMI FL 33161</b><br><b>(866) 373-7450</b> |                                   | \$   | <b>2011</b><br>Form <b>1099-MISC</b>                   |                 |   |
|  |                                   | 2 Royalties  |  |                 |   |
|  |                                   | \$   |  |                 |   |
|  |                                   | 3 Other income   | 4 Federal income tax withheld                          |                 | <b>Copy 2</b><br>To be filed with recipient's state income tax return, when required. |
|  |                                   | \$   | \$   |                 |   |
| PAYER'S federal identification number  | RECIPIENT'S identification number | 5 Fishing boat proceeds  | 6 Medical and health care payments                     |                 |   |
|  |                                   | \$   | \$   |                 |   |
| RECIPIENT'S name   |                                   | 7 Nonemployee compensation   | 8 Substitute payments in lieu of dividends or interest |                 |   |
| <b>EUGENE KIMBLE</b>   |                                   | \$ <b>14155.00</b>   | \$   |                 |   |
| Street address (including apt. no.)  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds                             |                 |   |
|  |                                   | \$   | \$   |                 |   |
| City, state, and ZIP code  |                                   | 11   | 12   |                 |   |
| <b>WHITE PLAINS NY 10602</b>   |                                   |  |  |                 |   |
| Account number (see instructions)  |                                   | 13 Excess golden parachute payments  | 14 Gross proceeds paid to an attorney                  |                 |   |
| <b>009051LONG/Z66 A</b>  |                                   | \$   | \$   |                 |   |
| 15a Section 409A deferrals   | 15b Section 409A income           | 16 State tax withheld  | 17 State/Payer's state no.                             | 18 State income |   |
| \$   | \$                                | \$   | <b>FL</b>  | \$              |   |
|  |                                   | \$   |  | \$              |   |

Form **1099-MISC**

Department of the Treasury - Internal Revenue Service

☐ CORRECTED (if checked)

|  |                                   |  |  |                 |  |
|--|-----------------------------------|--|--|-----------------|--|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.   |                                   | 1 Rents  | OMB No. 1545-0115                                      |                 | <b>Miscellaneous Income</b>  |
| <b>LATE EXPRESS COURIER SERVICE INC</b><br><b>1545 N.E. 123RD STREET</b><br><b>NORTH MIAMI FL 33161</b><br><b>(866) 373-7450</b> |                                   | \$   | <b>2011</b><br>Form <b>1099-MISC</b>                   |                 |  |
|  |                                   | 2 Royalties  |  |                 |  |
|  |                                   | \$   |  |                 |  |
| LONG/Z66/2011/4/00922 / 002/009051   |                                   | 3 Other income   | 4 Federal income tax withheld                          |                 | <b>Copy B</b><br>For Recipient   |
|  |                                   | \$   | \$   |                 |  |
| PAYER'S federal identification number  | RECIPIENT'S identification number | 5 Fishing boat proceeds  | 6 Medical and health care payments                     |                 |  |
|  |                                   | \$   | \$   |                 |  |
| RECIPIENT'S name   |                                   | 7 Nonemployee compensation   | 8 Substitute payments in lieu of dividends or interest |                 | This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. |
| <b>EUGENE KIMBLE</b>   |                                   | \$ <b>14155.00</b>   | \$   |                 |  |
| Street address (including apt. no.)  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds                             |                 |  |
|  |                                   | \$   | \$   |                 |  |
| City, state, and ZIP code  |                                   | 11   | 12   |                 |  |
| <b>WHITE PLAINS NY 10602</b>   |                                   |  |  |                 |  |
| Account number (see instructions)  |                                   | 13 Excess golden parachute payments  | 14 Gross proceeds paid to an attorney                  |                 |  |
| <b>009051LONG/Z66 A</b>  |                                   | \$   | \$   |                 |  |
| 15a Section 409A deferrals   | 15b Section 409A income           | 16 State tax withheld  | 17 State/Payer's state no.                             | 18 State income |  |
| \$   | \$                                | \$   | <b>FL</b>  | \$              |  |
|  |                                   | \$   |  | \$              |  |

Form **1099-MISC**

(keep for your records)

Department of the Treasury - Internal Revenue Service



☐ CORRECTED (if checked)

|   |                                   |  |  |  |   |
|---|-----------------------------------|--|--|--|---|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.  |                                   | 1 Rents  | OMB No. 1545-0115                                      |  | <b>Miscellaneous Income</b>   |
| <b>LATE EXPRESS COURIER SERVICE INC</b><br><b>1545 N.E. 123RD STREET</b><br><b>NORTH MIAMI FL 33161</b><br><b>(866) 373-7450</b>              |                                   | \$   | <b>2011</b><br>Form <b>1099-MISC</b>                   |  |   |
|   |                                   | 2 Royalties  |  |  |   |
|   |                                   | \$   |  |  |   |
|   |                                   | 3 Other income   | 4 Federal income tax withheld                          |  | <b>Copy 2</b><br>To be filed with recipient's state income tax return, when required. |
|   |                                   | \$   | \$   |  |   |
| PAYER'S federal identification number   | RECIPIENT'S identification number | 5 Fishing boat proceeds  | 6 Medical and health care payments                     |  |   |
|   |                                   | \$   | \$   |  |   |
|   |                                   | 7 Nonemployee compensation   | 8 Substitute payments in lieu of dividends or interest |  |   |
| RECIPIENT'S name<br><b>OSCAR ORE</b><br><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>REGO PARK NY 11374</b> |                                   | \$ 180.00  | \$   |  |   |
|   |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds                             |  |   |
|   |                                   | \$   | \$   |  |   |
|   |                                   | 11   | 12   |  |   |
|   |                                   | 13 Excess golden parachute payments  | 14 Gross proceeds paid to an attorney                  |  |   |
|   |                                   | \$   | \$   |  |   |
| Account number (see instructions)   |                                   | 16 State tax withheld  | 17 State/Payer's state no.                             |  | 18 State income   |
| 000234LONG/Z66 A  |                                   | \$   | FL   |  | \$  |
| 15a Section 409A deferrals  | 15b Section 409A income           | \$   |  |  | \$  |
| \$  | \$                                | \$   |  |  | \$  |

Form **1099-MISC**

Department of the Treasury - Internal Revenue Service

☐ CORRECTED (if checked)

|   |                                   |  |  |  |  |
|---|-----------------------------------|--|--|--|--|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.  |                                   | 1 Rents  | OMB No. 1545-0115                                      |  | <b>Miscellaneous Income</b>  |
| <b>LATE EXPRESS COURIER SERVICE INC</b><br><b>1545 N.E. 123RD STREET</b><br><b>NORTH MIAMI FL 33161</b><br><b>(866) 373-7450</b>              |                                   | \$   | <b>2011</b><br>Form <b>1099-MISC</b>                   |  |  |
|   |                                   | 2 Royalties  |  |  |  |
|   |                                   | \$   |  |  |  |
|   |                                   | 3 Other income   | 4 Federal income tax withheld                          |  | <b>Copy B</b><br>For Recipient   |
|   |                                   | \$   | \$   |  |  |
| PAYER'S federal identification number   | RECIPIENT'S identification number | 5 Fishing boat proceeds  | 6 Medical and health care payments                     |  | This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. |
|   |                                   | \$   | \$   |  |  |
| RECIPIENT'S name<br><b>OSCAR ORE</b><br><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>REGO PARK NY 11374</b> |                                   | 7 Nonemployee compensation   | 8 Substitute payments in lieu of dividends or interest |  |  |
|   |                                   | \$ 180.00  | \$   |  |  |
|   |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds                             |  |  |
|   |                                   | \$   | \$   |  |  |
|   |                                   | 11   | 12   |  |  |
|   |                                   | 13 Excess golden parachute payments  | 14 Gross proceeds paid to an attorney                  |  |  |
|   |                                   | \$   | \$   |  |  |
| Account number (see instructions)   |                                   | 16 State tax withheld  | 17 State/Payer's state no.                             |  | 18 State income  |
| 000234LONG/Z66 A  |                                   | \$   | FL   |  | \$   |
| 15a Section 409A deferrals  | 15b Section 409A income           | \$   |  |  | \$   |
| \$  | \$                                | \$   |  |  | \$   |

Form **1099-MISC**

(keep for your records)

Department of the Treasury - Internal Revenue Service



☐ CORRECTED (if checked)

|  |                                   |  |  |                 |   |
|--|-----------------------------------|--|--|-----------------|---|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.   |                                   | 1 Rents  | OMB No. 1545-0115                                      |                 | <b>Miscellaneous Income</b>   |
| <b>LATE EXPRESS COURIER SERVICE INC</b><br><b>1545 N.E. 123RD STREET</b><br><b>NORTH MIAMI FL 33161</b><br><b>(866) 373-7450</b> |                                   | \$   | <b>2011</b><br>Form <b>1099-MISC</b>                   |                 |   |
|  |                                   | 2 Royalties  |  |                 |   |
|  |                                   | \$   |  |                 |   |
|  |                                   | 3 Other income   | 4 Federal income tax withheld                          |                 | <b>Copy 2</b><br>To be filed with recipient's state income tax return, when required. |
|  |                                   | \$   | \$   |                 |   |
| PAYER'S federal identification number  | RECIPIENT'S identification number | 5 Fishing boat proceeds  | 6 Medical and health care payments                     |                 |   |
|  |                                   | \$   | \$   |                 |   |
| RECIPIENT'S name   |                                   | 7 Nonemployee compensation   | 8 Substitute payments in lieu of dividends or interest |                 |   |
| <b>ANDRES SALAS</b><br><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>BROOKLYN NY 11211</b>      |                                   | \$ 8339.00   | \$   |                 |   |
|  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds                             |                 |   |
|  |                                   | 11   | 12   |                 |   |
| Account number (see instructions)  |                                   | 13 Excess golden parachute payments  | 14 Gross proceeds paid to an attorney                  |                 |   |
| <b>000084LONG/Z66 A</b>  |                                   | \$   | \$   |                 |   |
| 15a Section 409A deferrals   | 15b Section 409A income           | 16 State tax withheld  | 17 State/Payer's state no.                             | 18 State income |   |
| \$   | \$                                | \$   | FL   | \$              |   |

Form **1099-MISC**

Department of the Treasury - Internal Revenue Service

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|  |                                   |  |  |                 |  |
|--|-----------------------------------|--|--|-----------------|--|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.   |                                   | 1 Rents  | OMB No. 1545-0115                                      |                 | <b>Miscellaneous Income</b>  |
| <b>LATE EXPRESS COURIER SERVICE INC</b><br><b>1545 N.E. 123RD STREET</b><br><b>NORTH MIAMI FL 33161</b><br><b>(866) 373-7450</b> |                                   | \$   | <b>2011</b><br>Form <b>1099-MISC</b>                   |                 |  |
|  |                                   | 2 Royalties  |  |                 |  |
|  |                                   | \$   |  |                 |  |
| LONG/Z66/2011/4/00922 / 002/000084   |                                   | 3 Other income   | 4 Federal income tax withheld                          |                 | <b>Copy B</b><br>For Recipient   |
|  |                                   | \$   | \$   |                 |  |
| PAYER'S federal identification number  | RECIPIENT'S identification number | 5 Fishing boat proceeds  | 6 Medical and health care payments                     |                 | This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. |
|  |                                   | \$   | \$   |                 |  |
| RECIPIENT'S name   |                                   | 7 Nonemployee compensation   | 8 Substitute payments in lieu of dividends or interest |                 |  |
| <b>ANDRES SALAS</b><br><br>Street address (including apt. no.)<br>City, state, and ZIP code<br><b>BROOKLYN NY 11211</b>          |                                   | \$ 8339.00   | \$   |                 |  |
|  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds                             |                 |  |
|  |                                   | 11   | 12   |                 |  |
| Account number (see instructions)  |                                   | 13 Excess golden parachute payments  | 14 Gross proceeds paid to an attorney                  |                 |  |
| <b>000084LONG/Z66 A</b>  |                                   | \$   | \$   |                 |  |
| 15a Section 409A deferrals   | 15b Section 409A income           | 16 State tax withheld  | 17 State/Payer's state no.                             | 18 State income |  |
| \$   | \$                                | \$   | FL   | \$              |  |

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Department of the Treasury - Internal Revenue Service



☐ CORRECTED (if checked)

|  |                                   |  |  |                 |   |
|--|-----------------------------------|--|--|-----------------|---|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.   |                                   | 1 Rents  | OMB No. 1545-0115                                      |                 | <b>Miscellaneous Income</b>   |
| <b>LATE EXPRESS COURIER SERVICE INC</b><br><b>1545 N.E. 123RD STREET</b><br><b>NORTH MIAMI FL 33161</b><br><b>(866) 373-7450</b> |                                   | \$   | <b>2011</b><br>Form <b>1099-MISC</b>                   |                 |   |
|  |                                   | 2 Royalties  |  |                 |   |
|  |                                   | \$   |  |                 |   |
|  |                                   | 3 Other income   | 4 Federal income tax withheld                          |                 | <b>Copy 2</b><br>To be filed with recipient's state income tax return, when required. |
|  |                                   | \$   | \$   |                 |   |
| PAYER'S federal identification number  | RECIPIENT'S identification number | 5 Fishing boat proceeds  | 6 Medical and health care payments                     |                 |   |
|  |                                   | \$   | \$   |                 |   |
| RECIPIENT'S name   |                                   | 7 Nonemployee compensation   | 8 Substitute payments in lieu of dividends or interest |                 |   |
| <b>MARIA TAVARES</b><br><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>BRONX NY 10458</b>        |                                   | \$ <b>654.00</b>   | \$   |                 |   |
|  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds                             |                 |   |
|  |                                   | 11   | 12   |                 |   |
| Account number (see instructions)  |                                   | 13 Excess golden parachute payments  | 14 Gross proceeds paid to an attorney                  |                 |   |
| <b>000166LONG/Z66 A</b>  |                                   | \$   | \$   |                 |   |
| 15a Section 409A deferrals   | 15b Section 409A income           | 16 State tax withheld  | 17 State/Payer's state no.                             | 18 State income |   |
| \$   | \$                                | \$   | <b>FL</b>  | \$              |   |

Form **1099-MISC**

Department of the Treasury - Internal Revenue Service

☐ CORRECTED (if checked)

|  |                                   |  |  |                 |  |
|--|-----------------------------------|--|--|-----------------|--|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.   |                                   | 1 Rents  | OMB No. 1545-0115                                      |                 | <b>Miscellaneous Income</b>  |
| <b>LATE EXPRESS COURIER SERVICE INC</b><br><b>1545 N.E. 123RD STREET</b><br><b>NORTH MIAMI FL 33161</b><br><b>(866) 373-7450</b> |                                   | \$   | <b>2011</b><br>Form <b>1099-MISC</b>                   |                 |  |
|  |                                   | 2 Royalties  |  |                 |  |
|  |                                   | \$   |  |                 |  |
| LONG/Z66/2011/4/00922 / 002/000166   |                                   | 3 Other income   | 4 Federal income tax withheld                          |                 | <b>Copy B</b><br>For Recipient   |
|  |                                   | \$   | \$   |                 |  |
| PAYER'S federal identification number  | RECIPIENT'S identification number | 5 Fishing boat proceeds  | 6 Medical and health care payments                     |                 | This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. |
|  |                                   | \$   | \$   |                 |  |
| RECIPIENT'S name   |                                   | 7 Nonemployee compensation   | 8 Substitute payments in lieu of dividends or interest |                 |  |
| <b>MARIA TAVARES</b><br><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>BRONX NY 10458</b>        |                                   | \$ <b>654.00</b>   | \$   |                 |  |
|  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds                             |                 |  |
|  |                                   | 11   | 12   |                 |  |
| Account number (see instructions)  |                                   | 13 Excess golden parachute payments  | 14 Gross proceeds paid to an attorney                  |                 |  |
| <b>000166LONG/Z66 A</b>  |                                   | \$   | \$   |                 |  |
| 15a Section 409A deferrals   | 15b Section 409A income           | 16 State tax withheld  | 17 State/Payer's state no.                             | 18 State income |  |
| \$   | \$                                | \$   | <b>FL</b>  | \$              |  |

Form **1099-MISC**

(keep for your records)

Department of the Treasury - Internal Revenue Service



☐ CORRECTED (if checked)

|   |                                   |  |  |                             |
|---|-----------------------------------|--|--|-----------------------------|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.  |                                   | 1 Rents<br>\$  | OMB No. 1545-0115<br><b>2012</b><br>Form 1099-MISC   | <b>Miscellaneous Income</b> |
| <b>LATE EXPRESS COURIER SERVICE INC</b><br><b>1545 N.E. 123RD STREET</b><br><b>NORTH MIAMI FL 33161</b><br><b>(305)807-1926</b>                 |                                   | 2 Royalties<br>\$  | <b>Copy 2</b><br><b>To be filed with recipient's state income tax return, when required.</b> |                             |
|   |                                   | 3 Other income<br>\$   |  |                             |
|   |                                   | 4 Federal income tax withheld<br>\$  |  |                             |
| PAYER'S federal identification number   | RECIPIENT'S identification number | 5 Fishing boat proceeds<br>\$  | 6 Medical and health care payments<br>\$   |                             |
| RECIPIENT'S name<br><b>KENNETH CHOW</b><br><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>BROOKLYN NY 11235</b> |                                   | 7 Nonemployee compensation<br>\$ <b>25548.00</b>   | 8 Substitute payments in lieu of dividends or interest<br>\$                                 |                             |
| Account number (see instructions)<br><b>001024LONG/Z66 A</b>  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/><br>\$ | 10 Crop insurance proceeds<br>\$   |                             |
|   |                                   | 11   | 12   |                             |
|   |                                   | 13 Excess golden parachute payments<br>\$  | 14 Gross proceeds paid to an attorney<br>\$  |                             |
| 15a Section 409A deferrals<br>\$  | 15b Section 409A income<br>\$     | 16 State tax withheld<br>\$  | 17 State/Payer's state no.<br><b>FL</b>  | 18 State income<br>\$       |

Form 1099-MISC

Department of the Treasury - Internal Revenue Service

☐ CORRECTED (if checked)

|   |                                   |  |  |  |
|---|-----------------------------------|--|--|--|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.  |                                   | 1 Rents<br>\$  | OMB No. 1545-0115<br><b>2012</b><br>Form 1099-MISC           | <b>Miscellaneous Income</b>  |
| <b>LATE EXPRESS COURIER SERVICE INC</b><br><b>1545 N.E. 123RD STREET</b><br><b>NORTH MIAMI FL 33161</b><br><b>(305)807-1926</b>                 |                                   | 2 Royalties<br>\$  | <b>Copy B</b><br><b>For Recipient</b>                        |  |
|   |                                   | 3 Other income<br>\$   |  |  |
|   |                                   | 4 Federal income tax withheld<br>\$  |  |  |
| PAYER'S federal identification number   | RECIPIENT'S identification number | 5 Fishing boat proceeds<br>\$  | 6 Medical and health care payments<br>\$                     | This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. |
| RECIPIENT'S name<br><b>KENNETH CHOW</b><br><br>Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>BROOKLYN NY 11235</b> |                                   | 7 Nonemployee compensation<br>\$ <b>25548.00</b>   | 8 Substitute payments in lieu of dividends or interest<br>\$ |  |
| Account number (see instructions)<br><b>001024LONG/Z66 A</b>  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/><br>\$ | 10 Crop insurance proceeds<br>\$                             |  |
|   |                                   | 11   | 12   |  |
|   |                                   | 13 Excess golden parachute payments<br>\$  | 14 Gross proceeds paid to an attorney<br>\$                  |  |
| 15a Section 409A deferrals<br>\$  | 15b Section 409A income<br>\$     | 16 State tax withheld<br>\$  | 17 State/Payer's state no.<br><b>FL</b>                      | 18 State income<br>\$  |

Form 1099-MISC

(keep for your records)

Department of the Treasury - Internal Revenue Service



LONG/Z66/2012/4/00801 / 002/001024  
 LATE EXPRESS COURIER  
 SERVICE INC  
 1545 N.E. 123RD STREET  
 NORTH MIAMI FL 33161

KENNETH CHOW

BROOKLYN NY 11235

## Instructions for Recipient

**Recipient's identification number.** For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), or adoption taxpayer identification number (ATIN). However, the issuer has reported your complete identification number to the IRS and, where applicable, to state and/or local governments.

**Account number.** May show an account or other unique number the payer assigned to distinguish your account.

**Amounts shown may be subject to self-employment (SE) tax.** If your net income from self-employment is \$400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If no income or social security and Medicare taxes were withheld and you are still receiving these payments, see Form 1040-ES (or Form 1040-ES-NR)). Individuals must report these amounts as explained in the box 7 instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

**Form 1099-MISC incorrect?** If this form is incorrect or has been issued in error, contact the payer. If you cannot get this form corrected, attach an explanation to your tax return and report your income correctly.

**Box 1.** Report rents from real estate on Schedule E (Form 1040). However, report rents on Schedule C (Form 1040) if you provided significant services to the tenant, sold real estate as a business, or rented personal property as a business.

**Box 2.** Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

**Box 3.** Generally, report this amount on the "Other income" line of Form 1040 (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

**Box 4.** Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your taxpayer identification number. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

**Box 5.** An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

**Box 6.** For individuals, report on Schedule C (Form 1040).

**Box 7.** Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box is SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report the amount from box 7 on Form 1040, line 7 (or Form 1040NR, line 8). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report it on Form 1040, line 21 (or Form 1040NR, line 21).

**Box 8.** Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Form 1040 (or Form 1040NR).

**Box 9.** If checked, \$5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

**Box 10.** Report this amount on Schedule F (Form 1040).

**Box 13.** Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

**Box 14.** Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

**Box 15a.** May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

**Box 15b.** Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR). See "Total Tax" in the Form 1040 (or Form 1040NR) instructions.

**Boxes 16–18.** Shows state or local income tax withheld from the payments.



☐ CORRECTED (if checked)

|   |                                   |  |  |                       |  |
|---|-----------------------------------|--|--|-----------------------|--|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.<br><br><b>LATE EXPRESS COURIER<br/>SERVICE INC (305)807-1926<br/>1545 N.E. 123RD STREET<br/>NORTH MIAMI FL 33161</b> |                                   | 1 Rents<br>\$  | OMB No. 1545-0115<br><br><b>2012</b>                         |                       | <b>Miscellaneous<br/>Income</b>  |
|   |                                   | 2 Royalties<br>\$  | Form <b>1099-MISC</b>  |                       |  |
|   |                                   | 3 Other income<br>\$   | 4 Federal income tax withheld<br>\$                          |                       |  |
| PAYER'S federal identification number   | RECIPIENT'S identification number | 5 Fishing boat proceeds<br>\$  | 6 Medical and health care payments<br>\$                     |                       | <b>Copy 2<br/>To be filed<br/>with<br/>recipient's<br/>state income<br/>tax return,<br/>when<br/>required.</b> |
| RECIPIENT'S name<br><br><b>JUAN C CORREA</b>  |                                   | 7 Nonemployee compensation<br>\$ <b>48785.35</b>   | 8 Substitute payments in lieu of dividends or interest<br>\$ |                       |  |
| Street address (including apt. no.)<br><br>_____<br><br>City, state, and ZIP code<br><b>BROOKLYN NY 11221</b>   |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/><br>\$ | 10 Crop insurance proceeds<br>\$                             |                       |  |
| Account number (see instructions)<br><br><b>000189LONG/Z66 A</b>  |                                   | 11   | 12   |                       |  |
|   |                                   | 13 Excess golden parachute payments<br>\$  | 14 Gross proceeds paid to an attorney<br>\$                  |                       |  |
| 15a Section 409A deferrals<br>\$  | 15b Section 409A income<br>\$     | 16 State tax withheld<br>\$  | 17 State/Payer's state no.<br><b>FL</b>                      | 18 State income<br>\$ |  |

Form **1099-MISC**

Department of the Treasury - Internal Revenue Service

☐ CORRECTED (if checked)

|   |                                   |  |  |  |  |
|---|-----------------------------------|--|--|--|--|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.<br><br><b>LATE EXPRESS COURIER<br/>SERVICE INC (305)807-1926<br/>1545 N.E. 123RD STREET<br/>NORTH MIAMI FL 33161</b> |                                   | 1 Rents<br>\$  | OMB No. 1545-0115<br><br><b>2012</b>                         |  | <b>Miscellaneous<br/>Income</b>  |
|   |                                   | 2 Royalties<br>\$  | Form <b>1099-MISC</b>  |  |  |
|   |                                   | 3 Other income<br>\$   | 4 Federal income tax withheld<br>\$                          |  |  |
| <b>LONG/Z66/2012/4/00801 / 002/000189</b>   |                                   | 5 Fishing boat proceeds<br>\$  | 6 Medical and health care payments<br>\$                     |  | <b>Copy B<br/>For Recipient</b>  |
| PAYER'S federal identification number   | RECIPIENT'S identification number | 7 Nonemployee compensation<br>\$ <b>48785.35</b>   | 8 Substitute payments in lieu of dividends or interest<br>\$ |  |  |
| RECIPIENT'S name<br><br><b>JUAN C CORREA</b>  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/><br>\$ | 10 Crop insurance proceeds<br>\$                             |  |  |
| Street address (including apt. no.)<br><br>_____<br><br>City, state, and ZIP code<br><b>BROOKLYN NY 11221</b>   |                                   | 11   | 12   |  | This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. |
| Account number (see instructions)<br><br><b>000189LONG/Z66 A</b>  |                                   | 13 Excess golden parachute payments<br>\$  | 14 Gross proceeds paid to an attorney<br>\$                  |  |  |
|   |                                   | 16 State tax withheld<br>\$  | 17 State/Payer's state no.<br><b>FL</b>                      |  |  |
| 15a Section 409A deferrals<br>\$  | 15b Section 409A income<br>\$     | 18 State income<br>\$  |  |  |  |

Form **1099-MISC**

(keep for your records)

Department of the Treasury - Internal Revenue Service



LONG/Z66/2012/4/00801 / 002/000189  
 LATE EXPRESS COURIER  
 SERVICE INC  
 1545 N.E. 123RD STREET  
 NORTH MIAMI FL 33161

JUAN C CORREA

BROOKLYN NY 11221

## Instructions for Recipient

**Recipient's identification number.** For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), or adoption taxpayer identification number (ATIN). However, the issuer has reported your complete identification number to the IRS and, where applicable, to state and/or local governments.

**Account number.** May show an account or other unique number the payer assigned to distinguish your account.

**Amounts shown may be subject to self-employment (SE) tax.** If your net income from self-employment is \$400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If no income or social security and Medicare taxes were withheld and you are still receiving these payments, see Form 1040-ES (or Form 1040-ES-NR)). Individuals must report these amounts as explained in the box 7 instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

**Form 1099-MISC incorrect?** If this form is incorrect or has been issued in error, contact the payer. If you cannot get this form corrected, attach an explanation to your tax return and report your income correctly.

**Box 1.** Report rents from real estate on Schedule E (Form 1040). However, report rents on Schedule C (Form 1040) if you provided significant services to the tenant, sold real estate as a business, or rented personal property as a business.

**Box 2.** Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

**Box 3.** Generally, report this amount on the "Other income" line of Form 1040 (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

**Box 4.** Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your taxpayer identification number. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

**Box 5.** An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

**Box 6.** For individuals, report on Schedule C (Form 1040).

**Box 7.** Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box is SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report the amount from box 7 on Form 1040, line 7 (or Form 1040NR, line 8). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report it on Form 1040, line 21 (or Form 1040NR, line 21).

**Box 8.** Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Form 1040 (or Form 1040NR).

**Box 9.** If checked, \$5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

**Box 10.** Report this amount on Schedule F (Form 1040).

**Box 13.** Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

**Box 14.** Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

**Box 15a.** May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

**Box 15b.** Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR). See "Total Tax" in the Form 1040 (or Form 1040NR) instructions.

**Boxes 16–18.** Shows state or local income tax withheld from the payments.



☐ CORRECTED (if checked)

|   |                                   |  |  |  |  |
|---|-----------------------------------|--|--|--|--|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.  |                                   | 1 Rents  | OMB No. 1545-0115                                      |  | <b>Miscellaneous Income</b>  |
| <b>LATE EXPRESS COURIER SERVICE INC</b><br><b>1545 N.E. 123RD STREET</b><br><b>NORTH MIAMI FL 33161</b><br><b>(305)807-1926</b> |                                   | \$   | <b>2012</b><br>Form <b>1099-MISC</b>                   |  |  |
|   |                                   | 2 Royalties  |  |  |  |
|   |                                   | \$   |  |  |  |
|   |                                   | 3 Other income   | 4 Federal income tax withheld                          |  | <b>Copy 2</b><br><b>To be filed with recipient's state income tax return, when required.</b> |
|   |                                   | \$   | \$   |  |  |
| PAYER'S federal identification number   | RECIPIENT'S identification number | 5 Fishing boat proceeds  | 6 Medical and health care payments                     |  |  |
|   |                                   | \$   | \$   |  |  |
| RECIPIENT'S name  |                                   | 7 Nonemployee compensation   | 8 Substitute payments in lieu of dividends or interest |  |  |
| DENNY M DELAROSA  |                                   | \$ 27281.29  | \$   |  |  |
| Street address (including apt. no.)   |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds                             |  |  |
| City, state, and ZIP code   |                                   | 11   | 12   |  |  |
| NEW YORK NY 10035   |                                   |  |  |  |  |
| Account number (see instructions)   |                                   | 13 Excess golden parachute payments  | 14 Gross proceeds paid to an attorney                  |  |  |
| 009003LONG/Z66 A  |                                   | \$   | \$   |  |  |
| 15a Section 409A deferrals  | 15b Section 409A income           | 16 State tax withheld  | 17 State/Payer's state no.                             |  | 18 State income  |
| \$  | \$                                | \$   | FL   |  | \$   |
|   |                                   | \$   |  |  | \$   |

Form **1099-MISC**

Department of the Treasury - Internal Revenue Service

☐ CORRECTED (if checked)

|   |                                   |  |  |  |  |
|---|-----------------------------------|--|--|--|--|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.  |                                   | 1 Rents  | OMB No. 1545-0115                                      |  | <b>Miscellaneous Income</b>  |
| <b>LATE EXPRESS COURIER SERVICE INC</b><br><b>1545 N.E. 123RD STREET</b><br><b>NORTH MIAMI FL 33161</b><br><b>(305)807-1926</b> |                                   | \$   | <b>2012</b><br>Form <b>1099-MISC</b>                   |  |  |
|   |                                   | 2 Royalties  |  |  |  |
|   |                                   | \$   |  |  |  |
|   |                                   | 3 Other income   | 4 Federal income tax withheld                          |  | <b>Copy B</b><br><b>For Recipient</b>  |
|   |                                   | \$   | \$   |  |  |
| PAYER'S federal identification number   | RECIPIENT'S identification number | 5 Fishing boat proceeds  | 6 Medical and health care payments                     |  |  |
|   |                                   | \$   | \$   |  |  |
| RECIPIENT'S name  |                                   | 7 Nonemployee compensation   | 8 Substitute payments in lieu of dividends or interest |  | This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. |
| DENNY M DELAROSA  |                                   | \$ 27281.29  | \$   |  |  |
| Street address (including apt. no.)   |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds                             |  |  |
| City, state, and ZIP code   |                                   | 11   | 12   |  |  |
| NEW YORK NY 10035   |                                   |  |  |  |  |
| Account number (see instructions)   |                                   | 13 Excess golden parachute payments  | 14 Gross proceeds paid to an attorney                  |  |  |
| 009003LONG/Z66 A  |                                   | \$   | \$   |  |  |
| 15a Section 409A deferrals  | 15b Section 409A income           | 16 State tax withheld  | 17 State/Payer's state no.                             |  | 18 State income  |
| \$  | \$                                | \$   | FL   |  | \$   |
|   |                                   | \$   |  |  | \$   |

Form **1099-MISC**

(keep for your records)

Department of the Treasury - Internal Revenue Service



LONG/Z66/2012/4/00801 / 002/009003  
 LATE EXPRESS COURIER  
 SERVICE INC  
 1545 N.E. 123RD STREET  
 NORTH MIAMI FL 33161

DENNY M DELAROSA

NEW YORK NY 10035

## Instructions for Recipient

**Recipient's identification number.** For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), or adoption taxpayer identification number (ATIN). However, the issuer has reported your complete identification number to the IRS and, where applicable, to state and/or local governments.

**Account number.** May show an account or other unique number the payer assigned to distinguish your account.

**Amounts shown may be subject to self-employment (SE) tax.** If your net income from self-employment is \$400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If no income or social security and Medicare taxes were withheld and you are still receiving these payments, see Form 1040-ES (or Form 1040-ES-NR)). Individuals must report these amounts as explained in the box 7 instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

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**Box 1.** Report rents from real estate on Schedule E (Form 1040). However, report rents on Schedule C (Form 1040) if you provided significant services to the tenant, sold real estate as a business, or rented personal property as a business.

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**Box 3.** Generally, report this amount on the "Other income" line of Form 1040 (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

**Box 4.** Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your taxpayer identification number. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

**Box 5.** An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

**Box 6.** For individuals, report on Schedule C (Form 1040).

**Box 7.** Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box is SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report the amount from box 7 on Form 1040, line 7 (or Form 1040NR, line 8). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report it on Form 1040, line 21 (or Form 1040NR, line 21).

**Box 8.** Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Form 1040 (or Form 1040NR).

**Box 9.** If checked, \$5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

**Box 10.** Report this amount on Schedule F (Form 1040).

**Box 13.** Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

**Box 14.** Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

**Box 15a.** May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

**Box 15b.** Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR). See "Total Tax" in the Form 1040 (or Form 1040NR) instructions.

**Boxes 16–18.** Shows state or local income tax withheld from the payments.



☐ CORRECTED (if checked)

|  |                                   |  |  |                       |  |
|--|-----------------------------------|--|--|-----------------------|--|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.<br><br><b>LATE EXPRESS COURIER<br/>SERVICE INC (305) 807-1926<br/>1545 N.E. 123RD STREET<br/>NORTH MIAMI FL 33161</b> |                                   | 1 Rents<br>\$  | OMB No. 1545-0115<br><br><b>2012</b>                         |                       | <b>Miscellaneous<br/>Income</b>  |
|  |                                   | 2 Royalties<br>\$  | Form <b>1099-MISC</b>  |                       |  |
|  |                                   | 3 Other income<br>\$   | 4 Federal income tax withheld<br>\$                          |                       |  |
| PAYER'S federal identification number  | RECIPIENT'S identification number | 5 Fishing boat proceeds<br>\$  | 6 Medical and health care payments<br>\$                     |                       | <b>Copy 2<br/>To be filed with<br/>recipient's<br/>state income<br/>tax return,<br/>when<br/>required.</b> |
| RECIPIENT'S name<br><br><b>ORTIZ EZEQUIEL</b>  |                                   | 7 Nonemployee compensation<br>\$ <b>21984.62</b>   | 8 Substitute payments in lieu of dividends or interest<br>\$ |                       |  |
| Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>MACUGIE PA 18062</b>  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/><br>\$ | 10 Crop insurance proceeds<br>\$                             |                       |  |
| Account number (see instructions)<br><br><b>009035LONG/Z66 A</b>   |                                   | 11   | 12   |                       |  |
|  |                                   | 13 Excess golden parachute payments<br>\$  | 14 Gross proceeds paid to an attorney<br>\$                  |                       |  |
| 15a Section 409A deferrals<br>\$   | 15b Section 409A income<br>\$     | 16 State tax withheld<br>\$  | 17 State/Payer's state no.<br><b>FL</b>                      | 18 State income<br>\$ |  |

Form **1099-MISC**

Department of the Treasury - Internal Revenue Service

☐ CORRECTED (if checked)

|  |                                   |  |  |  |  |
|--|-----------------------------------|--|--|--|--|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.<br><br><b>LATE EXPRESS COURIER<br/>SERVICE INC (305) 807-1926<br/>1545 N.E. 123RD STREET<br/>NORTH MIAMI FL 33161</b> |                                   | 1 Rents<br>\$  | OMB No. 1545-0115<br><br><b>2012</b>                         |  | <b>Miscellaneous<br/>Income</b>  |
|  |                                   | 2 Royalties<br>\$  | Form <b>1099-MISC</b>  |  |  |
|  |                                   | 3 Other income<br>\$   | 4 Federal income tax withheld<br>\$                          |  |  |
| <b>LONG/Z66/2012/4/00801 / 004/009035</b>  |                                   | 5 Fishing boat proceeds<br>\$  | 6 Medical and health care payments<br>\$                     |  | <b>Copy B<br/>For Recipient</b>  |
| PAYER'S federal identification number  | RECIPIENT'S identification number | 7 Nonemployee compensation<br>\$ <b>21984.62</b>   | 8 Substitute payments in lieu of dividends or interest<br>\$ |  |  |
| RECIPIENT'S name<br><br><b>ORTIZ EZEQUIEL</b>  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/><br>\$ | 10 Crop insurance proceeds<br>\$                             |  |  |
| Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>MACUGIE PA 18062</b>  |                                   | 11   | 12   |  | This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. |
| Account number (see instructions)<br><br><b>009035LONG/Z66 A</b>   |                                   | 13 Excess golden parachute payments<br>\$  | 14 Gross proceeds paid to an attorney<br>\$                  |  |  |
|  |                                   | 16 State tax withheld<br>\$  | 17 State/Payer's state no.<br><b>FL</b>                      |  |  |
| 15a Section 409A deferrals<br>\$   | 15b Section 409A income<br>\$     | 18 State income<br>\$  |  |  |  |

Form **1099-MISC**

(keep for your records)

Department of the Treasury - Internal Revenue Service



LONG/Z66/2012/4/00801 / 004/009035  
 LATE EXPRESS COURIER  
 SERVICE INC  
 1545 N.E. 123RD STREET  
 NORTH MIAMI FL 33161

ORTIZ EZEQUIEL

MACUGIE PA 18062

## Instructions for Recipient

**Recipient's identification number.** For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), or adoption taxpayer identification number (ATIN). However, the issuer has reported your complete identification number to the IRS and, where applicable, to state and/or local governments.

**Account number.** May show an account or other unique number the payer assigned to distinguish your account.

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**Form 1099-MISC incorrect?** If this form is incorrect or has been issued in error, contact the payer. If you cannot get this form corrected, attach an explanation to your tax return and report your income correctly.

**Box 1.** Report rents from real estate on Schedule E (Form 1040). However, report rents on Schedule C (Form 1040) if you provided significant services to the tenant, sold real estate as a business, or rented personal property as a business.

**Box 2.** Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

**Box 3.** Generally, report this amount on the "Other income" line of Form 1040 (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

**Box 4.** Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your taxpayer identification number. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

**Box 5.** An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

**Box 6.** For individuals, report on Schedule C (Form 1040).

**Box 7.** Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box is SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report the amount from box 7 on Form 1040, line 7 (or Form 1040NR, line 8). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report it on Form 1040, line 21 (or Form 1040NR, line 21).

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**Box 13.** Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

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**Box 15a.** May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

**Box 15b.** Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR). See "Total Tax" in the Form 1040 (or Form 1040NR) instructions.

**Boxes 16–18.** Shows state or local income tax withheld from the payments.



☐ CORRECTED (if checked)

|   |                                   |  |  |   |
|---|-----------------------------------|--|--|---|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.  |                                   | 1 Rents  | OMB No. 1545-0115                                      | <b>Miscellaneous Income</b>   |
| <b>LATE EXPRESS COURIER SERVICE INC</b><br><b>1545 N.E. 123RD STREET</b><br><b>NORTH MIAMI FL 33161</b><br><b>(305)807-1926</b> |                                   | \$   | <b>2012</b><br>Form <b>1099-MISC</b>                   |   |
|   |                                   | 2 Royalties  |  |   |
|   |                                   | \$   | 4 Federal income tax withheld                          | <b>Copy 2</b><br>To be filed with recipient's state income tax return, when required. |
|   |                                   | \$   | \$   |   |
| PAYER'S federal identification number   | RECIPIENT'S identification number | 5 Fishing boat proceeds  | 6 Medical and health care payments                     |   |
|   |                                   | \$   | \$   |   |
|   |                                   | 7 Nonemployee compensation   | 8 Substitute payments in lieu of dividends or interest |   |
| RECIPIENT'S name<br><b>JUANY D GUZMAN</b>   |                                   | \$ <b>15082.00</b>   | \$   |   |
| Street address (including apt. no.)<br><br>   |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds                             |   |
| City, state, and ZIP code<br><b>MACUNGIE PA 18062</b>   |                                   | \$   | \$   |   |
| Account number (see instructions)<br><b>009082LONG/Z66 A</b>  |                                   | 11   | 12   |   |
|   |                                   | 13 Excess golden parachute payments  | 14 Gross proceeds paid to an attorney                  |   |
|   |                                   | \$   | \$   |   |
| 15a Section 409A deferrals  | 15b Section 409A income           | 16 State tax withheld  | 17 State/Payer's state no.                             | 18 State income   |
| \$  | \$                                | \$   | <b>FL</b>  | \$  |
| \$  | \$                                | \$   |  | \$  |

Form **1099-MISC**

Department of the Treasury - Internal Revenue Service

☐ CORRECTED (if checked)

|   |                                   |  |  |  |
|---|-----------------------------------|--|--|--|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.  |                                   | 1 Rents  | OMB No. 1545-0115                                      | <b>Miscellaneous Income</b>  |
| <b>LATE EXPRESS COURIER SERVICE INC</b><br><b>1545 N.E. 123RD STREET</b><br><b>NORTH MIAMI FL 33161</b><br><b>(305)807-1926</b> |                                   | \$   | <b>2012</b><br>Form <b>1099-MISC</b>                   |  |
|   |                                   | 2 Royalties  |  |  |
|   |                                   | \$   | 4 Federal income tax withheld                          | <b>Copy B</b><br>For Recipient   |
|   |                                   | \$   | \$   |  |
| PAYER'S federal identification number   | RECIPIENT'S identification number | 5 Fishing boat proceeds  | 6 Medical and health care payments                     |  |
|   |                                   | \$   | \$   |  |
|   |                                   | 7 Nonemployee compensation   | 8 Substitute payments in lieu of dividends or interest |  |
| RECIPIENT'S name<br><b>JUANY D GUZMAN</b>   |                                   | \$ <b>15082.00</b>   | \$   | This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. |
| Street address (including apt. no.)<br><br>   |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds                             |  |
| City, state, and ZIP code<br><b>MACUNGIE PA 18062</b>   |                                   | \$   | \$   |  |
| Account number (see instructions)<br><b>009082LONG/Z66 A</b>  |                                   | 11   | 12   |  |
|   |                                   | 13 Excess golden parachute payments  | 14 Gross proceeds paid to an attorney                  |  |
|   |                                   | \$   | \$   |  |
| 15a Section 409A deferrals  | 15b Section 409A income           | 16 State tax withheld  | 17 State/Payer's state no.                             | 18 State income  |
| \$  | \$                                | \$   | <b>FL</b>  | \$   |
| \$  | \$                                | \$   |  | \$   |

Form **1099-MISC**

(keep for your records)

Department of the Treasury - Internal Revenue Service



LONG/Z66/2012/4/00801 / 002/009082  
 LATE EXPRESS COURIER  
 SERVICE INC  
 1545 N.E. 123RD STREET  
 NORTH MIAMI FL 33161

JUANY D GUZMAN

MACUNGIE PA 18062

## Instructions for Recipient

**Recipient's identification number.** For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), or adoption taxpayer identification number (ATIN). However, the issuer has reported your complete identification number to the IRS and, where applicable, to state and/or local governments.

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**Box 2.** Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

**Box 3.** Generally, report this amount on the "Other income" line of Form 1040 (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

**Box 4.** Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your taxpayer identification number. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

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|  |                                   |  |  |                       |  |
|--|-----------------------------------|--|--|-----------------------|--|
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|  |                                   | 2 Royalties<br>\$  | Form <b>1099-MISC</b>  |                       |  |
|  |                                   | 3 Other income<br>\$   | 4 Federal income tax withheld<br>\$                          |                       |  |
| PAYER'S federal identification number  | RECIPIENT'S identification number | 5 Fishing boat proceeds<br>\$  | 6 Medical and health care payments<br>\$                     |                       | <b>Copy 2<br/>To be filed with<br/>recipient's<br/>state income<br/>tax return,<br/>when<br/>required.</b> |
| RECIPIENT'S name<br><br><b>FERNANDO J HERNANDEZ</b>  |                                   | 7 Nonemployee compensation<br>\$ <b>27149.00</b>   | 8 Substitute payments in lieu of dividends or interest<br>\$ |                       |  |
| Street address (including apt. no.)<br><br>_____<br>City, state, and ZIP code<br><b>BROOKLYN NY 11211</b>  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/><br>\$ | 10 Crop insurance proceeds<br>\$                             |                       |  |
| Account number (see instructions)<br><br><b>000092LONG/Z66 A</b>   |                                   | 11   | 12   |                       |  |
|  |                                   | 13 Excess golden parachute payments<br>\$  | 14 Gross proceeds paid to an attorney<br>\$                  |                       |  |
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Form **1099-MISC**

Department of the Treasury - Internal Revenue Service

☐ CORRECTED (if checked)

|  |                                   |  |  |                       |  |
|--|-----------------------------------|--|--|-----------------------|--|
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|  |                                   | 3 Other income<br>\$   | 4 Federal income tax withheld<br>\$                          |                       |  |
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|  |                                   |  |  |                       |  |

Form **1099-MISC**

(keep for your records)

Department of the Treasury - Internal Revenue Service



LONG/Z66/2012/4/00801 / 002/000092  
 LATE EXPRESS COURIER  
 SERVICE INC  
 1545 N.E. 123RD STREET  
 NORTH MIAMI FL 33161

FERNANDO J HERNANDEZ

BROOKLYN NY 11211

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**Box 5.** An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

**Box 6.** For individuals, report on Schedule C (Form 1040).

**Box 7.** Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box is SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report the amount from box 7 on Form 1040, line 7 (or Form 1040NR, line 8). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report it on Form 1040, line 21 (or Form 1040NR, line 21).

**Box 8.** Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Form 1040 (or Form 1040NR).

**Box 9.** If checked, \$5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

**Box 10.** Report this amount on Schedule F (Form 1040).

**Box 13.** Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

**Box 14.** Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

**Box 15a.** May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

**Box 15b.** Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR). See "Total Tax" in the Form 1040 (or Form 1040NR) instructions.

**Boxes 16–18.** Shows state or local income tax withheld from the payments.



☐ CORRECTED (if checked)

|   |                                   |  |  |                       |  |
|---|-----------------------------------|--|--|-----------------------|--|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.<br><br><b>LATE EXPRESS COURIER<br/>SERVICE INC (305)807-1926<br/>1545 N.E. 123RD STREET<br/>NORTH MIAMI FL 33161</b> |                                   | 1 Rents<br>\$  | OMB No. 1545-0115<br><br><b>2012</b>                         |                       | <b>Miscellaneous<br/>Income</b>  |
|   |                                   | 2 Royalties<br>\$  | Form <b>1099-MISC</b>  |                       |  |
|   |                                   | 3 Other income<br>\$   | 4 Federal income tax withheld<br>\$                          |                       |  |
| PAYER'S federal identification number   | RECIPIENT'S identification number | 5 Fishing boat proceeds<br>\$  | 6 Medical and health care payments<br>\$                     |                       | <b>Copy 2<br/>To be filed with<br/>recipient's<br/>state income<br/>tax return,<br/>when<br/>required.</b> |
| RECIPIENT'S name<br><br><b>EUGENE KIMBLE</b>  |                                   | 7 Nonemployee compensation<br>\$ <b>9507.74</b>  | 8 Substitute payments in lieu of dividends or interest<br>\$ |                       |  |
| Street address (including apt. no.)<br><br>_____  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds<br>\$                             |                       |  |
| City, state, and ZIP code<br><br><b>WHITE PLAINS NY 10602</b>   |                                   | 11 _____   | 12 _____   |                       |  |
| Account number (see instructions)<br><br><b>009051LONG/Z66 A</b>  |                                   | 13 Excess golden parachute payments<br>\$  | 14 Gross proceeds paid to an attorney<br>\$                  |                       |  |
| 15a Section 409A deferrals<br>\$  | 15b Section 409A income<br>\$     | 16 State tax withheld<br>\$  | 17 State/Payer's state no.<br><b>FL</b>                      | 18 State income<br>\$ |  |

Form **1099-MISC**

Department of the Treasury - Internal Revenue Service

☐ CORRECTED (if checked)

|   |                                   |  |  |  |  |
|---|-----------------------------------|--|--|--|--|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.<br><br><b>LATE EXPRESS COURIER<br/>SERVICE INC (305)807-1926<br/>1545 N.E. 123RD STREET<br/>NORTH MIAMI FL 33161</b> |                                   | 1 Rents<br>\$  | OMB No. 1545-0115<br><br><b>2012</b>                         |  | <b>Miscellaneous<br/>Income</b>  |
|   |                                   | 2 Royalties<br>\$  | Form <b>1099-MISC</b>  |  |  |
|   |                                   | 3 Other income<br>\$   | 4 Federal income tax withheld<br>\$                          |  |  |
| <b>LONG/Z66/2012/4/00801 / 002/009051</b>   |                                   | 5 Fishing boat proceeds<br>\$  | 6 Medical and health care payments<br>\$                     |  | <b>Copy B<br/>For Recipient</b>  |
| PAYER'S federal identification number   | RECIPIENT'S identification number | 7 Nonemployee compensation<br>\$ <b>9507.74</b>  | 8 Substitute payments in lieu of dividends or interest<br>\$ |  |  |
| RECIPIENT'S name<br><br><b>EUGENE KIMBLE</b>  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds<br>\$                             |  |  |
| Street address (including apt. no.)<br><br>_____  |                                   | 11 _____   | 12 _____   |  | This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. |
| City, state, and ZIP code<br><br><b>WHITE PLAINS NY 10602</b>   |                                   | 13 Excess golden parachute payments<br>\$  | 14 Gross proceeds paid to an attorney<br>\$                  |  |  |
| Account number (see instructions)<br><br><b>009051LONG/Z66 A</b>  |                                   | 16 State tax withheld<br>\$  | 17 State/Payer's state no.<br><b>FL</b>                      |  |  |
| 15a Section 409A deferrals<br>\$  | 15b Section 409A income<br>\$     | 16 State tax withheld<br>\$  | 17 State/Payer's state no.<br><b>FL</b>                      |  | 18 State income<br>\$  |

Form **1099-MISC**

(keep for your records)

Department of the Treasury - Internal Revenue Service



LONG/Z66/2012/4/00801 / 002/009051  
 LATE EXPRESS COURIER  
 SERVICE INC  
 1545 N.E. 123RD STREET  
 NORTH MIAMI FL 33161

EUGENE KIMBLE

WHITE PLAINS NY 10602

## Instructions for Recipient

**Recipient's identification number.** For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), or adoption taxpayer identification number (ATIN). However, the issuer has reported your complete identification number to the IRS and, where applicable, to state and/or local governments.

**Account number.** May show an account or other unique number the payer assigned to distinguish your account.

**Amounts shown may be subject to self-employment (SE) tax.** If your net income from self-employment is \$400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If no income or social security and Medicare taxes were withheld and you are still receiving these payments, see Form 1040-ES (or Form 1040-ES-NR). Individuals must report these amounts as explained in the box 7 instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

**Form 1099-MISC incorrect?** If this form is incorrect or has been issued in error, contact the payer. If you cannot get this form corrected, attach an explanation to your tax return and report your income correctly.

**Box 1.** Report rents from real estate on Schedule E (Form 1040). However, report rents on Schedule C (Form 1040) if you provided significant services to the tenant, sold real estate as a business, or rented personal property as a business.

**Box 2.** Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

**Box 3.** Generally, report this amount on the "Other income" line of Form 1040 (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

**Box 4.** Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your taxpayer identification number. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

**Box 5.** An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

**Box 6.** For individuals, report on Schedule C (Form 1040).

**Box 7.** Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box is SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report the amount from box 7 on Form 1040, line 7 (or Form 1040NR, line 8). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report it on Form 1040, line 21 (or Form 1040NR, line 21).

**Box 8.** Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Form 1040 (or Form 1040NR).

**Box 9.** If checked, \$5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

**Box 10.** Report this amount on Schedule F (Form 1040).

**Box 13.** Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

**Box 14.** Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

**Box 15a.** May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

**Box 15b.** Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR). See "Total Tax" in the Form 1040 (or Form 1040NR) instructions.

**Boxes 16–18.** Shows state or local income tax withheld from the payments.



☐ CORRECTED (if checked)

|  |                                   |  |   |                       |  |
|--|-----------------------------------|--|---|-----------------------|--|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.<br><br><b>LATE EXPRESS COURIER<br/>SERVICE INC (305) 807-1926<br/>1545 N.E. 123RD STREET<br/>NORTH MIAMI FL 33161</b> |                                   | 1 Rents<br>\$  | OMB No. 1545-0115<br><br><b>2012</b><br><br>Form <b>1099-MISC</b> |                       | <b>Miscellaneous<br/>Income</b>  |
|  |                                   | 2 Royalties<br>\$  |   |                       |  |
|  |                                   | 3 Other income<br>\$   | 4 Federal income tax withheld<br>\$ <b>58.03</b>                  |                       |  |
| PAYER'S federal identification number  | RECIPIENT'S identification number | 5 Fishing boat proceeds<br>\$  | 6 Medical and health care payments<br>\$                          |                       |  |
| RECIPIENT'S name<br><br><b>MICHAEL K LATTIMORE</b>   |                                   | 7 Nonemployee compensation<br>\$ <b>13186.37</b>   | 8 Substitute payments in lieu of dividends or interest<br>\$      |                       | <b>Copy 2<br/>To be filed with<br/>recipient's<br/>state income<br/>tax return,<br/>when<br/>required.</b> |
| Street address (including apt. no.)  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds<br>\$                                  |                       |  |
| City, state, and ZIP code<br><b>YONKERS NY 10704</b>   |                                   | 11   | 12  |                       |  |
| Account number (see instructions)<br><br><b>009083LONG/Z66 A</b>   |                                   | 13 Excess golden parachute payments<br>\$  | 14 Gross proceeds paid to an attorney<br>\$                       |                       |  |
| 15a Section 409A deferrals<br>\$   | 15b Section 409A income<br>\$     | 16 State tax withheld<br>\$  | 17 State/Payer's state no.<br><b>FL</b>                           | 18 State income<br>\$ |  |

Form **1099-MISC**

Department of the Treasury - Internal Revenue Service

☐ CORRECTED (if checked)

|  |                                   |  |   |                       |   |
|--|-----------------------------------|--|---|-----------------------|---|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.<br><br><b>LATE EXPRESS COURIER<br/>SERVICE INC (305) 807-1926<br/>1545 N.E. 123RD STREET<br/>NORTH MIAMI FL 33161</b> |                                   | 1 Rents<br>\$  | OMB No. 1545-0115<br><br><b>2012</b><br><br>Form <b>1099-MISC</b> |                       | <b>Miscellaneous<br/>Income</b>   |
|  |                                   | 2 Royalties<br>\$  |   |                       |   |
|  |                                   | 3 Other income<br>\$   | 4 Federal income tax withheld<br>\$ <b>58.03</b>                  |                       |   |
| PAYER'S federal identification number  | RECIPIENT'S identification number | 5 Fishing boat proceeds<br>\$  | 6 Medical and health care payments<br>\$                          |                       |   |
| RECIPIENT'S name<br><br><b>MICHAEL K LATTIMORE</b>   |                                   | 7 Nonemployee compensation<br>\$ <b>13186.37</b>   | 8 Substitute payments in lieu of dividends or interest<br>\$      |                       | <b>Copy B<br/>For Recipient</b><br><br>This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. |
| Street address (including apt. no.)  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds<br>\$                                  |                       |   |
| City, state, and ZIP code<br><b>YONKERS NY 10704</b>   |                                   | 11   | 12  |                       |   |
| Account number (see instructions)<br><br><b>009083LONG/Z66 A</b>   |                                   | 13 Excess golden parachute payments<br>\$  | 14 Gross proceeds paid to an attorney<br>\$                       |                       |   |
| 15a Section 409A deferrals<br>\$   | 15b Section 409A income<br>\$     | 16 State tax withheld<br>\$  | 17 State/Payer's state no.<br><b>FL</b>                           | 18 State income<br>\$ |   |

Form **1099-MISC**

(keep for your records)

Department of the Treasury - Internal Revenue Service



LONG/Z66/2012/4/00801 / 002/009083  
 LATE EXPRESS COURIER  
 SERVICE INC  
 1545 N.E. 123RD STREET  
 NORTH MIAMI FL 33161

MICHAEL K LATTIMORE

YONKERS NY 10704

## Instructions for Recipient

**Recipient's identification number.** For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), or adoption taxpayer identification number (ATIN). However, the issuer has reported your complete identification number to the IRS and, where applicable, to state and/or local governments.

**Account number.** May show an account or other unique number the payer assigned to distinguish your account.

**Amounts shown may be subject to self-employment (SE) tax.** If your net income from self-employment is \$400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If no income or social security and Medicare taxes were withheld and you are still receiving these payments, see Form 1040-ES (or Form 1040-ES-NR). Individuals must report these amounts as explained in the box 7 instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

**Form 1099-MISC incorrect?** If this form is incorrect or has been issued in error, contact the payer. If you cannot get this form corrected, attach an explanation to your tax return and report your income correctly.

**Box 1.** Report rents from real estate on Schedule E (Form 1040). However, report rents on Schedule C (Form 1040) if you provided significant services to the tenant, sold real estate as a business, or rented personal property as a business.

**Box 2.** Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

**Box 3.** Generally, report this amount on the "Other income" line of Form 1040 (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

**Box 4.** Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your taxpayer identification number. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

**Box 5.** An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

**Box 6.** For individuals, report on Schedule C (Form 1040).

**Box 7.** Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box is SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report the amount from box 7 on Form 1040, line 7 (or Form 1040NR, line 8). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report it on Form 1040, line 21 (or Form 1040NR, line 21).

**Box 8.** Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Form 1040 (or Form 1040NR).

**Box 9.** If checked, \$5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

**Box 10.** Report this amount on Schedule F (Form 1040).

**Box 13.** Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

**Box 14.** Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

**Box 15a.** May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

**Box 15b.** Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR). See "Total Tax" in the Form 1040 (or Form 1040NR) instructions.

**Boxes 16-18.** Shows state or local income tax withheld from the payments.



☐ CORRECTED (if checked)

|  |                                   |  |  |                       |  |
|--|-----------------------------------|--|--|-----------------------|--|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.<br><br><b>LATE EXPRESS COURIER<br/>SERVICE INC (305) 807-1926<br/>1545 N.E. 123RD STREET<br/>NORTH MIAMI FL 33161</b> |                                   | 1 Rents<br>\$  | OMB No. 1545-0115<br><br><b>2012</b>                         |                       | <b>Miscellaneous<br/>Income</b>  |
|  |                                   | 2 Royalties<br>\$  | Form <b>1099-MISC</b>  |                       |  |
|  |                                   | 3 Other income<br>\$   | 4 Federal income tax withheld<br>\$                          |                       |  |
| PAYER'S federal identification number  | RECIPIENT'S identification number | 5 Fishing boat proceeds<br>\$  | 6 Medical and health care payments<br>\$                     |                       | <b>Copy 2<br/>To be filed<br/>with<br/>recipient's<br/>state income<br/>tax return,<br/>when<br/>required.</b> |
| RECIPIENT'S name<br><b>EDWIN PEREZ</b>   |                                   | 7 Nonemployee compensation<br>\$ <b>30860.00</b>   | 8 Substitute payments in lieu of dividends or interest<br>\$ |                       |  |
| Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>BRONX NY 10456</b>  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds<br>\$                             |                       |  |
| Account number (see instructions)<br><b>009084LONG/Z66 A</b>   |                                   | 11   | 12   |                       |  |
|  |                                   | 13 Excess golden parachute payments<br>\$  | 14 Gross proceeds paid to an attorney<br>\$                  |                       |  |
| 15a Section 409A deferrals<br>\$   | 15b Section 409A income<br>\$     | 16 State tax withheld<br>\$  | 17 State/Payer's state no.<br><b>FL</b>                      | 18 State income<br>\$ |  |

Form **1099-MISC**

Department of the Treasury - Internal Revenue Service

☐ CORRECTED (if checked)

|  |                                   |  |  |  |  |
|--|-----------------------------------|--|--|--|--|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.<br><br><b>LATE EXPRESS COURIER<br/>SERVICE INC (305) 807-1926<br/>1545 N.E. 123RD STREET<br/>NORTH MIAMI FL 33161</b> |                                   | 1 Rents<br>\$  | OMB No. 1545-0115<br><br><b>2012</b>                         |  | <b>Miscellaneous<br/>Income</b>  |
|  |                                   | 2 Royalties<br>\$  | Form <b>1099-MISC</b>  |  |  |
|  |                                   | 3 Other income<br>\$   | 4 Federal income tax withheld<br>\$                          |  |  |
| <b>LONG/Z66/2012/4/00801 / 002/009084</b>  |                                   | 5 Fishing boat proceeds<br>\$  | 6 Medical and health care payments<br>\$                     |  | <b>Copy B<br/>For Recipient</b>  |
| PAYER'S federal identification number  | RECIPIENT'S identification number | 7 Nonemployee compensation<br>\$ <b>30860.00</b>   | 8 Substitute payments in lieu of dividends or interest<br>\$ |  |  |
| RECIPIENT'S name<br><b>EDWIN PEREZ</b>   |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds<br>\$                             |  |  |
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| Account number (see instructions)<br><b>009084LONG/Z66 A</b>   |                                   | 13 Excess golden parachute payments<br>\$  | 14 Gross proceeds paid to an attorney<br>\$                  |  |  |
|  |                                   | 16 State tax withheld<br>\$  | 17 State/Payer's state no.<br><b>FL</b>                      |  |  |
| 15a Section 409A deferrals<br>\$   | 15b Section 409A income<br>\$     | 16 State tax withheld<br>\$  | 17 State/Payer's state no.<br><b>FL</b>                      |  | 18 State income<br>\$  |

Form **1099-MISC**

(keep for your records)

Department of the Treasury - Internal Revenue Service



LONG/Z66/2012/4/00801 / 002/009084  
 LATE EXPRESS COURIER  
 SERVICE INC  
 1545 N.E. 123RD STREET  
 NORTH MIAMI FL 33161

EDWIN PEREZ

BRONX NY 10456

## Instructions for Recipient

**Recipient's identification number.** For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), or adoption taxpayer identification number (ATIN). However, the issuer has reported your complete identification number to the IRS and, where applicable, to state and/or local governments.

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**Box 3.** Generally, report this amount on the "Other income" line of Form 1040 (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

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**Box 6.** For individuals, report on Schedule C (Form 1040).

**Box 7.** Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box is SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report the amount from box 7 on Form 1040, line 7 (or Form 1040NR, line 8). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report it on Form 1040, line 21 (or Form 1040NR, line 21).

**Box 8.** Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Form 1040 (or Form 1040NR).

**Box 9.** If checked, \$5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

**Box 10.** Report this amount on Schedule F (Form 1040).

**Box 13.** Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

**Box 14.** Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

**Box 15a.** May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

**Box 15b.** Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR). See "Total Tax" in the Form 1040 (or Form 1040NR) instructions.

**Boxes 16–18.** Shows state or local income tax withheld from the payments.



☐ CORRECTED (if checked)

|  |                                   |  |  |  |  |
|--|-----------------------------------|--|--|--|--|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.<br><br><b>LATE EXPRESS COURIER<br/>SERVICE INC (305) 807-1926<br/>1545 N.E. 123RD STREET<br/>NORTH MIAMI FL 33161</b> |                                   | 1 Rents<br>\$  | OMB No. 1545-0115<br><br><b>2012</b>                         |  | <b>Miscellaneous<br/>Income</b>  |
|  |                                   | 2 Royalties<br>\$  | Form <b>1099-MISC</b>  |  |  |
|  |                                   | 3 Other income<br>\$   | 4 Federal income tax withheld<br>\$                          |  |  |
| PAYER'S federal identification number  | RECIPIENT'S identification number | 5 Fishing boat proceeds<br>\$  | 6 Medical and health care payments<br>\$                     |  | <b>Copy 2<br/>To be filed<br/>with<br/>recipient's<br/>state income<br/>tax return,<br/>when<br/>required.</b> |
| RECIPIENT'S name<br><br><b>BARRON TORRES</b>   |                                   | 7 Nonemployee compensation<br>\$ <b>312.00</b>   | 8 Substitute payments in lieu of dividends or interest<br>\$ |  |  |
| Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>YONKERS NY 10701</b>  |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/><br>\$ | 10 Crop insurance proceeds<br>\$                             |  |  |
| Account number (see instructions)<br><br><b>009078LONG/Z66 A</b>   |                                   | 11   | 12   |  |  |
|  |                                   | 13 Excess golden parachute payments<br>\$  | 14 Gross proceeds paid to an attorney<br>\$                  |  |  |
| 15a Section 409A deferrals<br>\$   | 15b Section 409A income<br>\$     | 16 State tax withheld<br>\$  | 17 State/Payer's state no.<br><b>FL</b>                      |  | 18 State income<br>\$  |

Form **1099-MISC**

Department of the Treasury - Internal Revenue Service

☐ CORRECTED (if checked)

|  |                                   |  |  |  |  |
|--|-----------------------------------|--|--|--|--|
| PAYER'S name, street address, city, state, ZIP code, and telephone no.<br><br><b>LATE EXPRESS COURIER<br/>SERVICE INC (305) 807-1926<br/>1545 N.E. 123RD STREET<br/>NORTH MIAMI FL 33161</b> |                                   | 1 Rents<br>\$  | OMB No. 1545-0115<br><br><b>2012</b>                         |  | <b>Miscellaneous<br/>Income</b>  |
|  |                                   | 2 Royalties<br>\$  | Form <b>1099-MISC</b>  |  |  |
|  |                                   | 3 Other income<br>\$   | 4 Federal income tax withheld<br>\$                          |  |  |
| <b>LONG/Z66/2012/4/00801 / 002/009078</b>  |                                   | 5 Fishing boat proceeds<br>\$  | 6 Medical and health care payments<br>\$                     |  | <b>Copy B<br/>For Recipient</b>  |
| PAYER'S federal identification number  | RECIPIENT'S identification number | 7 Nonemployee compensation<br>\$ <b>312.00</b>   | 8 Substitute payments in lieu of dividends or interest<br>\$ |  |  |
| RECIPIENT'S name<br><br><b>BARRON TORRES</b>   |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/><br>\$ | 10 Crop insurance proceeds<br>\$                             |  |  |
| Street address (including apt. no.)<br><br>City, state, and ZIP code<br><b>YONKERS NY 10701</b>  |                                   | 11   | 12   |  | This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. |
| Account number (see instructions)<br><br><b>009078LONG/Z66 A</b>   |                                   | 13 Excess golden parachute payments<br>\$  | 14 Gross proceeds paid to an attorney<br>\$                  |  |  |
|  |                                   | 16 State tax withheld<br>\$  | 17 State/Payer's state no.<br><b>FL</b>                      |  |  |
| 15a Section 409A deferrals<br>\$   | 15b Section 409A income<br>\$     | 16 State tax withheld<br>\$  | 17 State/Payer's state no.<br><b>FL</b>                      |  | 18 State income<br>\$  |

Form **1099-MISC**

(keep for your records)

Department of the Treasury - Internal Revenue Service



LONG/Z66/2012/4/00801 / 002/009078  
 LATE EXPRESS COURIER  
 SERVICE INC  
 1545 N.E. 123RD STREET  
 NORTH MIAMI FL 33161

BARRON TORRES

YONKERS NY 10701

## Instructions for Recipient

**Recipient's identification number.** For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), or adoption taxpayer identification number (ATIN). However, the issuer has reported your complete identification number to the IRS and, where applicable, to state and/or local governments.

**Account number.** May show an account or other unique number the payer assigned to distinguish your account.

**Amounts shown may be subject to self-employment (SE) tax.** If your net income from self-employment is \$400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If no income or social security and Medicare taxes were withheld and you are still receiving these payments, see Form 1040-ES (or Form 1040-ES(NR)). Individuals must report these amounts as explained in the box 7 instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

**Form 1099-MISC incorrect?** If this form is incorrect or has been issued in error, contact the payer. If you cannot get this form corrected, attach an explanation to your tax return and report your income correctly.

**Box 1.** Report rents from real estate on Schedule E (Form 1040). However, report rents on Schedule C (Form 1040) if you provided significant services to the tenant, sold real estate as a business, or rented personal property as a business.

**Box 2.** Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

**Box 3.** Generally, report this amount on the "Other income" line of Form 1040 (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

**Box 4.** Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your taxpayer identification number. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

**Box 5.** An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

**Box 6.** For individuals, report on Schedule C (Form 1040).

**Box 7.** Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box is SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report the amount from box 7 on Form 1040, line 7 (or Form 1040NR, line 8). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report it on Form 1040, line 21 (or Form 1040NR, line 21).

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**Box 10.** Report this amount on Schedule F (Form 1040).

**Box 13.** Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

**Box 14.** Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

**Box 15a.** May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

**Box 15b.** Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR). See "Total Tax" in the Form 1040 (or Form 1040NR) instructions.

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|  |                                   | 3 Other income<br>\$   | 4 Federal income tax withheld<br>\$                          |                       |  |
| PAYER'S federal identification number  | RECIPIENT'S identification number | 5 Fishing boat proceeds<br>\$  | 6 Medical and health care payments<br>\$                     |                       | <b>Copy 2<br/>To be filed<br/>with<br/>recipient's<br/>state income<br/>tax return,<br/>when<br/>required.</b> |
| RECIPIENT'S name<br><br><b>BRYANT WHITE</b>  |                                   | 7 Nonemployee compensation<br>\$ <b>10593.09</b>   | 8 Substitute payments in lieu of dividends or interest<br>\$ |                       |  |
| Street address (including apt. no.)<br><br>_____   |                                   | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds<br>\$                             |                       |  |
| City, state, and ZIP code<br><br><b>YONKERS NY 10701</b>   |                                   | 11 _____   | 12 _____   |                       |  |
| Account number (see instructions)<br><br><b>000113LONG/Z66 A</b>   |                                   | 13 Excess golden parachute payments<br>\$  | 14 Gross proceeds paid to an attorney<br>\$                  |                       |  |
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Form **1099-MISC**

Department of the Treasury - Internal Revenue Service

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Department of the Treasury - Internal Revenue Service



LONG/Z66/2012/4/00801 / 002/000113  
 LATE EXPRESS COURIER  
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BRYANT WHITE

YONKERS NY 10701

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